| Fill in this information to identify your case: | | |
|---|-------------------------------|-------------------------|
| United States Bankruptcy Court for the: | | |
| WESTERN DISTRICT OF MICHIGAN | | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | ☐ Check if t amended |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself | | |
|-----|--|--|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. | Jeffery First name L Middle name Hughes Last name and Suffix (Sr., Jr., II, III) | Dessie First name J Middle name Hughes Last name and Suffix (Sr., Jr., II, III) |
| 2. | All other names you have used in the last 8 years | | |
| | Include your married or maiden names. | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-3760 | xxx-xx-0493 |

Case:18-02908-swd Doc #:1 Filed: 06/29/2018 Page 2 of 77

Jeffery L Hughes Debtor 1 **Dessie J Hughes** Debtor 2 Case number (if known) About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 516 S Union St Traverse City, MI 49684 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code **Grand Traverse** County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Check one: Check one: Why you are choosing this district to file for bankruptcy Over the last 180 days before filing this petition, Over the last 180 days before filing this petition, I I have lived in this district longer than in any have lived in this district longer than in any other

- other district.
- I have another reason. Explain. (See 28 U.S.C. § 1408.)

- district.
- I have another reason. Explain. (See 28 U.S.C. § 1408.)

| | otor 1 Jeffery L Hughe otor 2 Dessie J Hughe | | | | | Case number (if known) | |
|-----|--|------------------------|-----------------------------|---|---|---|--------------|
| Par | t 2: Tell the Court Abo | ut Your Bankru | ıptcy Ca | ase | | | |
| 7. | The chapter of the Bankruptcy Code you a | | (For a b | orief description of each, see go to the top of page 1 and | Notice Required check the approp | by 11 U.S.C. § 342(b) for Individuals Filing for Bankrupt riate box. | су |
| | choosing to file under | ■ Chapte | r 7 | | | | |
| | | ☐ Chapte | r 11 | | | | |
| | | ☐ Chapte | r 12 | | | | |
| | | ☐ Chapte | r 13 | | | | |
| 8. | How you will pay the fe | abou ordei a pre | t how your. If your printed | ou may pay. Typically, if you a attorney is submitting your p address. | are paying the fee ayment on your b | heck with the clerk's office in your local court for more de yourself, you may pay with cash, cashier's check, or moehalf, your attorney may pay with a credit card or check | oney with |
| | | | | y the fee in installments. If y ee <i>in Installments</i> (Official For | | option, sign and attach the Application for Individuals to | ⊃ay |
| | | but is appli | s not req es to you | uired to, waive your fee, and ur family size and you are un | may do so only if able to pay the fe | otion only if you are filing for Chapter 7. By law, a judge f your income is less than 150% of the official poverty lire in installments). If you choose this option, you must fill official Form 103B) and file it with your petition. | ne that |
| | | | | | | | |
| 9. | Have you filed for bankruptcy within the | ■ No. | | | | | |
| | last 8 years? | ☐ Yes. | | | | | |
| | | | District | | When | Case number | |
| | | | District | | When | Case number | |
| | | | District | | When | Case number | |
| 10. | Are any bankruptcy cases pending or being | ■ No | | | | | |
| | filed by a spouse who i not filing this case with you, or by a business partner, or by an affiliate? | s 🛮 Yes. | | | | | |
| | | | Debtor | | | Relationship to you | |
| | | | District | | When | Case number, if known | |
| | | | Debtor | | | Relationship to you | |
| | | | District | | When | Case number, if known | |
| 11. | Do you rent your residence? | ■ No. | Go to I | ine 12. | | | |
| | residence: | ☐ Yes. | Has yo | our landlord obtained an evict | tion judgment aga | ainst you? | |
| | | | | No. Go to line 12. | | | |
| | | | | Yes. Fill out <i>Initial Statemen</i> this bankruptcy petition. | nt About an Eviction | on Judgment Against You (Form 101A) and file it as par | t of |
| | | | | | | | |

| | tor 1 Jeffery L Hughes tor 2 Dessie J Hughes | | | Case number (if known) | | | | | |
|-----|---|--------------------|---------------------------------|--|--|--|--|--|--|
| Par | t 3: Report About Any Bu | ısinesses | You Own as a Sole Propri | etor | | | | | |
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to Part 4. | | | | | | |
| | | ☐ Yes. | Name and location of business | | | | | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name of business, if any | | | | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Number, Street, City, Sta | ate & ZIP Code | | | | | |
| | it to this petition. | | Check the appropriate b | ox to describe your business: | | | | | |
| | | | ☐ Health Care Bus | iness (as defined in 11 U.S.C. § 101(27A)) | | | | | |
| | | | ☐ Single Asset Rea | al Estate (as defined in 11 U.S.C. § 101(51B)) | | | | | |
| | | | ☐ Stockbroker (as | defined in 11 U.S.C. § 101(53A)) | | | | | |
| | | | ☐ Commodity Brok | er (as defined in 11 U.S.C. § 101(6)) | | | | | |
| | | | ☐ None of the above | /e | | | | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadline operation | s. If you indicate that you are | e court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure | | | | | |
| | For a definition of <i>small</i> | ■ No. | I am not filing under Cha | apter 11. | | | | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am filing under Chapte Code. | r 11, but I am NOT a small business debtor according to the definition in the Bankruptcy | | | | | |
| | | ☐ Yes. | I am filing under Chapte | r 11 and I am a small business debtor according to the definition in the Bankruptcy Code. | | | | | |
| Par | t 4: Report if You Own or | Have Any | / Hazardous Property or A | ny Property That Needs Immediate Attention | | | | | |
| 14. | Do you own or have any | ■ No. | | | | | | | |
| | property that poses or is alleged to pose a threat of imminent and identifiable hazard to | ☐ Yes. | What is the hazard? | | | | | | |
| | public health or safety? Or do you own any property that needs | | If immediate attention is | | | | | | |
| | immediate attention? | | needed, why is it needed? | | | | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is the property? | | | | | | |
| | | | | Number, Street, City, State & Zip Code | | | | | |
| | | | | | | | | | |

Case:18-02908-swd Doc #:1 Filed: 06/29/2018 Page 5 of 77

| Pari | Dessie J Hughes Explain Your Efforts t | o Re | eceive a Briefing About Credit Counseling | | | | | | | | | | | |
|---------------------------------------|---|------|--|--|----|----------------------------------|---|--|--|--|--|---|--|--|
| ۵. | Explain Four Ellione | | out Debtor 1: | | Ab | out De | btor 2 (Spouse Only in a Joint Case): | | | | | | | |
| 15. | Tell the court whether you have received a briefing about credit counseling. The law requires that you | | u must check one: I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion. | | | u must I rec cour this | check one: eived a briefing from an approved credit nseling agency within the 180 days before I filed bankruptcy petition, and I received a certificate of pletion. | | | | | | | |
| | receive a briefing about credit counseling before | | Attach a copy of the certificate and the payment plan, if any, that you developed with the agency. | | | | th a copy of the certificate and the payment plan, if that you developed with the agency. | | | | | | | |
| | ou file for bankruptcy. 'ou must truthfully check ne of the following hoices. If you cannot do o, you are not eligible to | | I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion. | | | cour this | eived a briefing from an approved credit nseling agency within the 180 days before I filed bankruptcy petition, but I do not have a certificate ompletion. | | | | | | | |
| If yo can will I you cred | file. If you file anyway, the court can dismiss your case, you | | Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any. | | | | in 14 days after you file this bankruptcy petition, you T file a copy of the certificate and payment plan, if | | | | | | | |
| | will lose whatever filing fee you paid, and your creditors can begin collection activities again. | | I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement. | | | from thos requ temp | tify that I asked for credit counseling services an approved agency, but was unable to obtain e services during the 7 days after I made my est, and exigent circumstances merit a 30-day porary waiver of the requirement. | | | | | | | |
| | | | To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case. | | | attac to ob befor circu | sk for a 30-day temporary waiver of the requirement, h a separate sheet explaining what efforts you made tain the briefing, why you were unable to obtain it re you filed for bankruptcy, and what exigent mstances required you to file this case. case may be dismissed if the court is dissatisfied | | | | | | | |
| | | | | | | | | | | | | Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. | | |
| | | | Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. | | _ | caus | e and is infliced to a maximum of 15 days. | | | | | | | |
| | | | I am not required to receive a briefing about credit counseling because of: | | | | not required to receive a briefing about credit nseling because of: | | | | | | | |
| | | | Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. | | | | Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. | | | | | | | |
| | | | Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after reasonably tried to do so. | | | _ | Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so. | | | | | | | |
| | | | Active duty. I am currently on active military duty in a military combat zone. | | | _ | Active duty. I am currently on active military duty in a military combat zone. | | | | | | | |
| | | | If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court. | | | abou | u believe you are not required to receive a briefing it credit counseling, you must file a motion for waiver edit counseling with the court. | | | | | | | |

| | tor 1 Jeffery L Hughes tor 2 Dessie J Hughes | | | | Case nu | umber (if known) | |
|---|--|----------------------|--|--|--------------------------------------|------------------------------|--|
| Part | | ions for Re | enorting Purnoses | | | | |
| | What kind of debts do you have? | 16a. | Are your debts primarily consu | | | e defined in 11 U.S.C. § | 101(8) as "incurred by an |
| | you nave: | | ☐ No. Go to line 16b. | , lairilly, or flouser | ioia parpose. | | |
| | | | Yes. Go to line 17. | | | | |
| | | 16b. | Are your debts primarily busine | ess debts? Busin | ess debts are de | lebts that you incurred | to obtain |
| | | | money for a business or investme | ent or through the | operation of the | e business or investmen | nt. |
| | | | ☐ No. Go to line 16c. | | | | |
| | | 40 | Yes. Go to line 17. | | | | |
| | | 16c. | State the type of debts you owe the | hat are not consui | mer debts or bus | siness debts | |
| 17. | Are you filing under Chapter 7? | □ No. | I am not filing under Chapter 7. G | to to line 18. | | | |
| | Do you estimate that after any exempt property is excluded and | ■ Yes. | I am filing under Chapter 7. Do yo are paid that funds will be availab | | | | nd administrative expenses |
| | administrative expenses are paid that funds will | | ■ No | | | | |
| | be available for distribution to unsecured creditors? | | ☐ Yes | | | | |
| 18. | How many Creditors do | 1 -49 | | 1 ,000-5,000 | 1 | □ 25,001-5 | |
| | you estimate that you owe? | □ 50-99 | | 5001-10,000 | | ☐ 50,001-1 | |
| | | ☐ 100-19 ☐ 200-99 | | □ 10,001-25,0 | 000 | ☐ More tha | .n100,000 |
| 19. | How much do you | □ \$0 - \$9 | 50,000 | □ \$1,000,001 | - \$10 million | □ \$500,000 | 0,001 - \$1 billion |
| | estimate your assets to be worth? | | 01 - \$100,000 | □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million | | | □ \$1,000,000,001 - \$10 billion |
| | | | 001 - \$500,000 | | | | ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion |
| | | 山 \$500,0 | 001 - \$1 million | — ф100,000,00 | 71 - \$300 Hillion | i inore tria | 11 \$30 billion |
| 20. | How much do you | □ \$0 - \$t | 1 | □ \$1,000,001 | | · · · | 0,001 - \$1 billion |
| | to be? | | 01 - \$100,000 001 - \$500,000 | ☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million | | : : : : | 000,001 - \$10 billion ,000,001 - \$50 billion |
| | | _ | 001 - \$1 million | | 01 - \$500 million | | an \$50 billion |
| Part | : 7: Sign Below | | | | | | |
| For | you | I have ex | amined this petition, and I declare | under penalty of p | perjury that the in | information provided is | true and correct. |
| | | | chosen to file under Chapter 7, I ar ates Code. I understand the relief | | | | |
| | If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). | | | | | | elp me fill out this |
| | | I request | relief in accordance with the chapt | er of title 11, Unite | ed States Code, | , specified in this petition | on. |
| I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 15 and 3571. | | | | | | | |
| | | /s/ Jeffe | ry L Hughes | | /s/ Dessie J | | |
| | | | L Hughes of Debtor 1 | | Dessie J Hu Signature of D | | |
| | | Executed | on June 29, 2018 | | Executed on | June 29, 2018 | |
| | | | MM / DD / YYYY | | | MM / DD / YYYY | |

| Debtor 1 Debtor 2 | Jeffery L Hughes Dessie J Hughes | | | Cas | e number (if known) |
|----------------------|--|--|---------------------------------|--------------|---|
| | | | | | |
| | attorney, if you are ted by one | under Chapter 7, 11, 12, or 13 of | of title 11, United States Code | , and have e | informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b) |
| • | not represented by ey, you do not need s page. | and, in a case in which § 707(b) schedules filed with the petition | | ave no know | ledge after an inquiry that the information in the |
| | | /s/ Rory D. Mortimer | | Date | June 29, 2018 |
| | | Signature of Attorney for Debto | r | | MM / DD / YYYY |
| | | Rory D. Mortimer P40341 Printed name | | | |
| | | Mortimer Law Firm, PLC | | | |
| | | Firm name | | | |
| | | 444 W. Baldwin Street Alpena, MI 49707 | | | |
| | | Number, Street, City, State & ZIP Code | | | |
| | | Contact phone 989-358-2100 | En | ail address | info@rdmortimerlaw.com |
| | | P40341 MI | | | |
| | | Bar number & State | | | |

Certificate Number: 15317-MIW-CC-030880506



CERTIFICATE OF COUNSELING

I CERTIFY that on <u>April 15, 2018</u>, at <u>1:28</u> o'clock <u>PM PDT</u>, <u>Dessie J Hughes</u> received from <u>Access Counseling, Inc.</u>, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the <u>Western District of Michigan</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: April 15, 2018 By: /s/Jane Alba

Name: Jane Alba

Title: Counselor

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Certificate Number: 15317-MIW-CC-030880449



CERTIFICATE OF COUNSELING

I CERTIFY that on <u>April 15, 2018</u>, at <u>1:15</u> o'clock <u>PM PDT</u>, <u>Jeffery L Hughes</u> received from <u>Access Counseling, Inc.</u>, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the <u>Western District of Michigan</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: April 15, 2018 By: /s/Jane Alba

Name: Jane Alba

Title: Counselor

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Case:18-02908-swd Doc #:1 Filed: 06/29/2018 Page 10 of 77

| Fill | in this inform | ation to identify your o | ase: | | | |
|--------|------------------------------|---|--|--|--------------|--------------------------------|
| Deb | otor 1 | Jeffery L Hughes First Name | Middle Name | Last Name | | |
| Deb | otor 2 | Dessie J Hughes | | | | |
| (Spo | use if, filing) | First Name | Middle Name | Last Name | | |
| Uni | ted States Ban | kruptcy Court for the: | WESTERN DISTRICT (| OF MICHIGAN | | |
| | e number | | | | | |
| (if kn | own) | | | | _ | k if this is an nded filing |
| | | | | | aniei | ided illing |
| Οt. | Calal Fam | 1000: | | | | |
| | | <u>m 106Sum</u> | and Liebilities er | ad Cartain Statistical Information | | |
| | | | | nd Certain Statistical Information are filing together, both are equally responsible f | or supplyi | 12/15 |
| info | mation. Fill o | ut all of your schedule | s first; then complete th | ne information on this form. If you are filing ameno | | |
| you | original form | is, you must fill out a r | new Summary and chec | k the box at the top of this page. | | |
| Par | Summa | rize Your Assets | | | | |
| | | | | | Your a | |
| | | | | | Value | of what you own |
| 1. | Schedule A/ 1a. Copy line | B: Property (Official Fo | rm 106A/B) om Schedule A/B | | \$ | 235,200.00 |
| | | | | | • | 94 992 26 |
| | | | | | \$ | 81,882.36 |
| | 1c. Copy line | 63, Total of all property | on Schedule A/B | | \$ | 317,082.36 |
| Par | t 2: Summa | rize Your Liabilities | | | | |
| | | | | | Your I | iabilities |
| | | | | | Amour | nt you owe |
| 2. | | | aims Secured by Property | | ¢ | 269,516.36 |
| | 2a. Copy the | total you listed in Colun | nn A, <i>Amount of claim,</i> at | the bottom of the last page of Part 1 of Schedule D | \$ | 203,310.30 |
| 3. | | | Insecured Claims (Officia (priority unsecured claim | ll Form 106E/F) ns) from line 6e of <i>Schedule E/F</i> | \$ | 133,969.45 |
| | ., | | " | , | — | 254 265 27 |
| | 3b. Copy the | e total claims from Part 2 | (nonpriority unsecured c | laims) from line 6j of Schedule E/F | \$ | 251,265.37 |
| | | | | Your total liabilities | . ¢ | 654,751.18 |
| | | | | rour total nabilities | Ψ | 034,731.10 |
| Par | 3: Summa | rize Your Income and | Fxnenses | | | |
| | | | | | | |
| 4. | | Your Income (Official For Imbined monthly income | | ÷ I | \$ | 4,432.76 |
| 5. | Schedule J: ` | Your Expenses (Official | Form 106J) | | | |
| | | | | | \$ | 4,727.00 |
| Par | 4: Answer | These Questions for | Administrative and Stat | istical Records | | |
| 6. | Are you filin | g for bankruptcy unde | r Chapters 7, 11, or 13? | | | |
| | - | • • • | • | heck this box and submit this form to the court with yo | our other so | hedules. |
| | Yes | | | | | |
| 7. | _ | f debt do you have? | | | | |
| | | | | debts are those "incurred by an individual primarily for og for statistical purposes. 28 U.S.C. § 159. | a persona | l, family, or |
| | ☐ Your de | | consumer debts. You ha | ve nothing to report on this part of the form. Check thi | s box and s | submit this form to |

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Case:18-02908-swd Doc #:1 Filed: 06/29/2018 Page 11 of 77

| Debto | Dr 2 Dessie J Hughes | Case number (if known) | | |
|-------|---|---|---------|----------|
| | | | | |
| 8. I | From the Statement of Your Current Monthly Income: Co | py your total current monthly income from Official Form | <u></u> | 6 224 04 |

122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

6,234.91

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Debtor 1 Jeffery L Hughes

| | Tota | l claim |
|--|------|------------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$_ | 133,969.45 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$_ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 137,748.43 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$_ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$_ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 271,717.88 |

| | | Case: | 18-02908-SV | va I | DOC #:1 | Filed: 06/2 | 9/2018 | Page 1 | 2 01 77 | | |
|------------|--------------------------|-----------------------------|--|-----------|-------------------------|--|--------------|--------------------------------|---------------|--|----|
| Fill | in this informa | tion to identify | your case and th | nis filin | g: | | | | | | |
| Deb | tor 1 | Jeffery L Hu | | e Name | | Last Name | | | | | |
| | tor 2 use, if filing) | Dessie J Hu First Name | | e Name | | Last Name | | | | | |
| Unit | ed States Bank | ruptcy Court for | the: WESTERN | DISTR | RICT OF MIC | HIGAN | | | | | |
| Cas | e number | | | | | | | | | ☐ Check if this is amended filing | an |
| ~ " | ::-! - | 400 A /F | , | | | | | | | | |
| | | n 106A/E A/B: P i | _ | | | | | | | 40/45 | • |
| | | | | | 4 auly auga | f an accet fite in m | ara than ana | antomomy lint | the seest in | 12/15 the category where yo | |
| Part | | ch Residence, B | uilding, Land, or Ot quitable interest in a | | | | | | | | |
| | Yes. Where is the | ne property? | | | | | | | | | |
| 1.1 | 516 S Union | St | | Wha | at is the prope | rty? Check all that app | ply | | | | |
| | Street address, if a | vailable, or other des | scription | | Duplex or m | nulti-unit building | | the amount o | f any secured | ims or exemptions. Put diclaims on Schedule D. ns Secured by Property. | |
| | Traverse Cit | ty MI | 49684-0000 | | | ed or mobile home | | Current valu | | Current value of the portion you own? | |
| | City | State | ZIP Code | | T imeshare | property | | Describe the | | \$235,200.0 our ownership interestancy by the entireties, | t |
| | | | | Who | - | est in the property? | ? Check one | a life estate) | , if known. | | 0. |
| | Grand Trave | erse | | | Debtor 1 on Debtor 2 on | • | | land cont | iact intere | | |
| | County | | | | | d Debtor 2 only | | | | munity property | |
| | | | | | | of the debtors and you wish to add a ation number: | | (see instru n, such as loca | , | | |
| | | | | | irm, 1 1/2 b V value | oath, 1350 sq ft | ., city lot | | | | |
| | pages you hav | e attached for | ortion you own fo Part 1. Write that | | | | | | > | \$235,200.00 | |

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

| Debto Debto | | effery L Hughes Dessie J Hughes | Ca | se number (if known) | |
|----------------|-----------------------|---|---|--|--|
| . Ca | rs, vans | , trucks, tractors, sport utility ve | ehicles, motorcycles | | |
| | Nο | | | | |
| ■、 | | | | | |
| | . 00 | | | | |
| 3.1 | Make: | Jeep | Who has an interest in the property? Check one | | claims or exemptions. Put |
| | Model: | Liberty | ■ Debtor 1 only | | red claims on Schedule D: nims Secured by Property. |
| | Year: | 2010 | Debtor 2 only | | |
| | | mate mileage: 194000 | Debtor 1 and Debtor 2 only | Current value of the entire property? | Current value of the portion you own? |
| | | formation: | ☐ At least one of the debtors and another | | |
| | | | Check if this is community property (see instructions) | \$5,000.00 | \$5,000.00 |
| 3.2 | Make: | Subaru | Who has an interest in the property? Observer | Do not deduct secured of | claims or exemptions. Put |
| 3.2 | | Crosstrek | Who has an interest in the property? Check one | | ed claims on Schedule D: |
| | Model: | | Debtor 1 only | Creditors who have Cla | ims Secured by Property. |
| | Year: | 2016 | Debtor 2 only | Current value of the | Current value of the |
| | | mate mileage: 13000 | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| | | formation: | At least one of the debtors and another | | |
| | leased | l vehicle | ☐ Check if this is community property | \$1.00 | \$1.00 |
| | | | (see instructions) | | |
| | | | n for all of your entries from Part 2, including an | | \$5,001.00 |
| Jar4 2 | Dagari | the Verry Developed and Herrecheld 16 | | <u></u> | |
| | | be Your Personal and Household It | terest in any of the following items? | | Current value of the |
| oo y | ou own | or nave any legal of equicable in | nerest in any of the following terms: | | portion you own? Do not deduct secured claims or exemptions. |
| Ex | <i>amples:</i> No | goods and furnishings Major appliances, furniture, linens escribe | s, china, kitchenware | | |
| | | table& chairs, h ottamens, table | tor, table & chairs, shelving units, butcher butch, couch, chair, cupboard, couch, chaires, tv, beds, dressers, washer, dryer, work to shevling racks, lawnmower, snowblower, m | s, able, 2 | \$5,000.00 |
| Ex | ectronics camples: | 3 | eo, stereo, and digital equipment; computers, printer | rs, scanners; music collect | ions; electronic devices |
| | | escribe | | | |
| | | | d lautan | | 6400.04 |
| | | 2 iphones 2 ipa | a. iaptop | | \$100.00 |

Case:18-02908-swd Doc #:1 Filed: 06/29/2018 Page 14 of 77

| | Jeffery L Hu Dessie J Hu | | er (if known) | |
|--|---------------------------------|--|-------------------|--|
| 8. Collectible Examples: ■ No □ Yes. De | Antiques and other collection | figurines; paintings, prints, or other artwork; books, pictures, or other art objects; sons, memorabilia, collectibles | stamp, coin, or b | paseball card collections; |
| 9. Equipment Examples: ☐ No ☐ Yes. De | Sports, photo musical instru | graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, sk | is; canoes and l | kayaks; carpentry tools; |
| | | 2 kayaks, 4 bikes, | | \$300.00 |
| 10. Firearms Examples □ No ■ Yes. De | · | s, shotguns, ammunition, and related equipment | | |
| | | pistol, rifle, 2 shotguns, | | \$1,000.00 |
| 11. Clothes Examples □ No ■ Yes. De | | othes, furs, leather coats, designer wear, shoes, accessories | | |
| | | clothes | | \$500.00 |
| 12. Jewelry Examples □ No ■ Yes. De | | welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watch | es, gems, gold, | silver |
| | | wedding rings, watch | | \$3,000.00 |
| ■ No □ Yes. De 14. Any other ■ No | s: Dogs, cats, | d household items you did not already list, including any health aids you did | not list | |
| | | of all of your entries from Part 3, including any entries for pages you have att | tached | \$9,900.00 |
| Part 4: Descr | | | | |
| Do you own | or have any l | egal or equitable interest in any of the following? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| □ No | | nave in your wallet, in your home, in a safe deposit box, and on hand when you file | your petition | |

| Debtor 1 Debtor 2 | Jeffery L Hughe Dessie J Hughe | | | | Case number (if | known) | |
|--|---|--|---|---|--------------------------|------------------|----------------------|
| | | | | | Cash | _ | \$20.00 |
| Exan □ No | | | | certificates of deposit; shares in c he same institution, list each. Institution name: | redit unions, brok | serage houses, a | and other similar |
| | 1 | 17.1. | checking & savings | Lake Michigan Credit Union | n | | \$2,000.00 |
| | 1 | 17.2. | checking & savings | TBA Credit union dba acco | unt | | \$500.00 |
| | 1 | 17.3. | checking & savings | TBA Credit Union xx071 | | | \$5.00 |
| | 1 | 17.4. | health savings account | Health Equity - | | | \$3,400.00 |
| | 1 | 17.5. | checking | Huron Community Bank | | | \$4,200.00 |
| 19. Non- joint □ No | venture | ation a | about them | and unincorporated businesse | | | LC, partnership, and |
| | | JLF | ne of entity: lughes & Ass, dba- co nputer, printer, misc s | • | % of ownership | % | \$1,120.00 |
| Nego Non- ■ No □ Yes 21. Retire Exan | otiable instruments included instruments of the specific information of the specific information of the specific information of the specific information according to the specific information of the specific information according to the specific information and the specific information according to the specific information and | e bon ude p s are t ation a Issu | ds and other negotiable ersonal checks, cashiers' hose you cannot transfer bout them er name: | e and non-negotiable instrument checks, promissory notes, and me to someone by signing or delivering thrift savings accounts, or other p | oney orders. ng them. | | |
| □ No ■ Yes | s. List each account se | • | ely. f account: | Institution name: | | | |
| | | 403(B | | MEA Financial Services -M Retirement Services | ichigan Office | of | \$52,642.15 |
| | ķ | oensi | on | Michigan Office of Retirementure monthly benefit July 25, 2018 | ent Services - | | \$2,625.21 |

Case:18-02908-swd Doc #:1 Filed: 06/29/2018 Page 16 of 77

| | ebtor 1 ebtor 2 | Jeffery L Hughe Dessie J Hughe | | Case number (if known | n) |
|-----|--------------------|---|--|---|---|
| | Your sh Examp | | posits you have made so that you may | continue service or use from a company (electric, gas, water), telecommunications comp | anies, or others |
| | ■ No □ Yes | | Institutio | on name or individual: | |
| 23. | _ | es (A contract for a p | periodic payment of money to you, eithe | er for life or for a number of years) | |
| | ■ No □ Yes | lssuer | name and description. | | |
| | 26 U.S.C | s in an education IF C. §§ 530(b)(1), 529A | | program, or under a qualified state tuition p | rogram. |
| | ■ No □ Yes | Institut | tion name and description. Separately fi | ile the records of any interests.11 U.S.C. § 521(| c): |
| | Trusts, □ No | equitable or future | interests in property (other than any | thing listed in line 1), and rights or powers e | xercisable for your benefit |
| | Yes. | Give specific informa | ation about them | | |
| | | | Jeffery Lee Hughes and Des Trust- not funded | sie Jane Hughes- Revocable Living | \$0.00 |
| | Examp ■ No □ Yes. | | ation about them | ation holdings, liquor licenses, professional lice | Current value of the portion you own? |
| | | | | | Do not deduct secured claims or exemptions. |
| 28. | Tax refo | unds owed to you | | | |
| | | Give specific informa | tion about them, including whether you | already filed the returns and the tax years | |
| | ■ No | support les: Past due or lump Give specific informa | | upport, maintenance, divorce settlement, proper | rty settlement |
| | Examp ■ No | | disability insurance payments, disability loans you made to someone else | benefits, sick pay, vacation pay, workers' comp | pensation, Social Security |
| | Examp | s in insurance polices: Health, disability | | unt (HSA); credit, homeowner's, or renter's insur | rance |
| | □ No ■ Yes. N | Name the insurance | company of each policy and list its value Company name: | e. Beneficiary: | Surrender or refund value: |

Case:18-02908-swd Doc #:1 Filed: 06/29/2018 Page 17 of 77

| Debtor 1 Debtor 2 | Jeffery L Hughes Dessie J Hughes | | Case number (if known) | |
|------------------------------------|--|---|--|----------------|
| | no sur Face a | Owners Insurance - term policy , rrender value amount: \$250,000.00, debtor · & insured | spouse | \$1.00 |
| | term p | on National Life Insurance Co policy, no cash surrender value mount \$250,000.00, debtor owner ured | Jeff and Dessie Hughes Trust | \$1.00 |
| | term p Face <i>I</i> | on National Life Insurance Co. , policy, no cash surrender value Amount: \$250,000.00, debtor · & insured | Jeff & Dessie Hughes Trust | \$1.00 |
| | and Di no cas insure | Mutual Group Accidental Death ismemberment Life Insurance sh surrender value, debtored & owner amount \$2,000.00 - inactive | spouse | \$1.00 |
| ■ No □ Yes. 33. Claims Examp ■ No | | ner or not you have filed a lawsuit or mad disputes, insurance claims, or rights to sue | e a demand for payment | |
| 34. Other o | | claims of every nature, including counte | erclaims of the debtor and rights to s | set off claims |
| ☐ No | nancial assets you did not al | ready list | | |
| | | 2018 Income tax refund prorated | pased on prior year | \$465.00 |
| | | r entries from Part 4, including any entrie | | \$66,981.36 |
| Part 5: De | scribe Any Business-Related Pr | operty You Own or Have an Interest In. List an | y real estate in Part 1. | |
| No. Go | own or have any legal or equitat o to Part 6. Go to line 38. | ole interest in any business-related property? | | |

Case:18-02908-swd Doc #:1 Filed: 06/29/2018 Page 18 of 77

| | otor 1 Jeffery L Hughes Dessie J Hughes | | | Case number (if known) | |
|--------------|---|-------------------------|-----------------|------------------------------|--------------|
| Part | t 6: Describe Any Farm- and Commercial Fishing-Relate If you own or have an interest in farmland, list it in Part | | Have an Interes | st In. | |
| 46. C | Do you own or have any legal or equitable interes | t in any farm- or con | nmercial fishin | ng-related property? | |
| | ■ No. Go to Part 7. | | | | |
| | ☐ Yes. Go to line 47. | | | | |
| Part | Describe All Property You Own or Have an Inte | rest in That You Did No | t List Above | | |
| | Do you have other property of any kind you did no Examples: Season tickets, country club membership No | | | | |
| | ☐ Yes. Give specific information | | | | |
| | | | | | |
| 54. | Add the dollar value of all of your entries from Pa | art 7. Write that num | ber here | | \$0.00 |
| | | | | | |
| Part | List the Totals of Each Part of this Form | | | | |
| 55. | Part 1: Total real estate, line 2 | | | | \$235,200.00 |
| 56. | Part 2: Total vehicles, line 5 | | \$5,001.00 | | |
| 57. | Part 3: Total personal and household items, line | 15 | \$9,900.00 | | |
| 58. | Part 4: Total financial assets, line 36 | | \$66,981.36 | | |
| 59. | Part 5: Total business-related property, line 45 | | \$0.00 | | |
| 60. | Part 6: Total farm- and fishing-related property, I | ine 52 | \$0.00 | | |
| 61. | Part 7: Total other property not listed, line 54 | + | \$0.00 | | |
| 62. | Total personal property. Add lines 56 through 61 | | \$81,882.36 | Copy personal property total | \$81,882.36 |
| 63. | Total of all property on Schedule A/B. Add line 55 | 5 + line 62 | | | \$317,082.36 |

Case:18-02908-swd Doc #:1 Filed: 06/29/2018 Page 19 of 77

| 31 | l in this inform | nation to identify your cas | e: | | | |
|--|--|--|--|--------------------------------|--|---|
| | ebtor 1 | Jeffery L Hughes | | | | |
| | | First Name | Middle Name | L | ast Name | |
| | ebtor 2 ouse if, filing) | First Name | Middle Name | L | ast Name | |
| Un | ited States Bar | nkruptcy Court for the: V | /ESTERN DISTRICT OF M | ICHIO | GAN | |
| | inca Claico Bai | Thruptoy Court for the. | TEOTERN BIOTRIOT OF IN | | | |
| | nse number | | | | | ☐ Check if this is an amended filing |
| \bigcirc | fficial Ear | m 106C | | | | |
| | fficial Fo | | | | | |
| 5 | chedule | e C: The Prop | erty You Cla | ım | as Exempt | 4/16 |
| the nee | property you lis | sted on <i>Schedule A/B: Prop</i> d attach to this page as mar | perty (Official Form 106A/B) | as yo | our source, list the property that you | or supplying correct information. Using claim as exempt. If more space is additional pages, write your name and |
| spe any fun exe | ecific dollar and applicable standard applicable standard applicable standard applicable | nount as exempt. Alternat atutory limit. Some exemp nlimited in dollar amount. | ively, you may claim the fo tions—such as those for However, if you claim an | ull fa heal exen | ir market value of the property be th aids, rights to receive certain I nption of 100% of fair market valu | One way of doing so is to state a eing exempted up to the amount of penefits, and tax-exempt retirement ue under a law that limits the t, your exemption would be limited |
| Pa | rt 1: Identif | y the Property You Claim | as Exempt | | | |
| 1. | Which set of | exemptions are you clain | ning? Check one only, ever | n if yo | our spouse is filing with you. | |
| | ☐ You are cla | aiming state and federal nor | nbankruptcy exemptions. 1 | ı1 U.S | S.C. § 522(b)(3) | |
| | You are cla | aiming federal exemptions. | 11 U.S.C. § 522(b)(2) | | | |
| 2 | | | - , , , , | mpt | fill in the information below. | |
| | | on of the property and line or | Specific laws that allow exemption | | | |
| | | that lists this property | Current value of the portion you own Copy the value from Schedule A/B | | ount of the exemption you claim eck only one box for each exemption. | • |
| De | ebtor 1 Exem | | | | | |
| | - | Liberty 194000 miles Diedule A/B: 3.1 | \$5,000.00 | | \$3,775.00 | 11 U.S.C. § 522(d)(2) |
| | Line from Gor | iodale 77 D. G. I | | | 100% of fair market value, up to any applicable statutory limit | |
| | | iberty 194000 miles | \$5,000.00 | | \$1,225.00 | 11 U.S.C. § 522(d)(5) |
| | Line from Sch | nedule A/B: 3.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | | gerator, table & chairs, | \$5,000.00 | | \$2,500.00 | 11 U.S.C. § 522(d)(3) |
| | | its, butcher block, tabl | le& ———————————————————————————————————— | _ | 100% of fair market value, up to | |
| chairs, hutch, couch, chair, cupboard, couch, chairs, ottamens, tables, tv, beds, dressers, washer, dryer, work table, 2 tables, stools, shevling racks, lawnmower, snowblower, misc Line from Schedule A/B: 6.1 | | , | | any applicable statutory limit | | |
| | | ipad, laptop | \$100.00 | | \$50.00 | 11 U.S.C. § 522(d)(3) |
| | Line from Sch | nedule A/B: 7.1 | | | 100% of fair market value, up to any applicable statutory limit | |

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | | ount of the exemption you claim | Specific laws that allow exemption |
|---|--|----------|---|------------------------------------|
| 2 kayaks, 4 bikes, Line from <i>Schedule A/B</i> : 9.1 | \$300.00 | ■ | \$150.00 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(5) |
| pistol, rifle, 2 shotguns, Line from Schedule A/B: 10.1 | \$1,000.00 | ■ | \$1,000.00 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(5) |
| clothes Line from Schedule A/B: 11.1 | \$500.00 | | \$250.00 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(3) |
| wedding rings, watch Line from Schedule A/B: 12.1 | \$3,000.00 | ■ | \$1,500.00 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(4) |
| Cash Line from Schedule A/B: 16.1 | \$20.00 | | \$10.00 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(5) |
| checking & savings: TBA Credit union dba account Line from Schedule A/B: 17.2 | \$500.00 | | \$500.00 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(5) |
| checking & savings: TBA Credit Union xx071 Line from Schedule A/B: 17.3 | \$5.00 | ■ | \$5.00 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(5) |
| JLHughes & Ass, dba- consulting business computer, printer, misc supplies 100% Line from Schedule A/B: 19.1 | \$1,120.00 | | \$1,120.00 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(6) |
| Auto Owners Insurance - term policy , no surrender value Face amount: \$250,000.00, debtor owner & insured Beneficiary: spouse Line from Schedule A/B: 31.1 | \$1.00 | - | \$1.00 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(7) |
| Jackson National Life Insurance Co term policy, no cash surrender value face amount \$250,000.00, debtor owner & insured Beneficiary: Jeff and Dessie Hughes Trust Line from Schedule A/B: 31.2 | \$1.00 | | \$1.00 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(7) |

Case:18-02908-swd Doc #:1 Filed: 06/29/2018 Page 21 of 77

| Brief description of the property and line on Schedule A/B that lists this property | | Current value of the Amount of the exemption you claim portion you own | | Specific laws that allow exemption | |
|--|--|--|--------|---|-----------------------|
| | | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | |
| te F o B T | ackson National Life Insurance Co., erm policy, no cash surrender value ace Amount: \$250,000.00, debtor wner & insured eneficiary: Jeff & Dessie Hughes rust ne from Schedule A/B: 31.3 | \$1.00 | | \$1.00 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(7) |
| | | | | | 44 11 8 0 8 522/4//5/ |
| 2018 Income tax refund prorated based on prior year Line from Schedule A/B: 35.1 | | \$465.00 | | \$465.00 | 11 U.S.C. § 522(d)(5) |
| | | ☐ 100% of fair market value, up to any applicable statutory limit | | · • | |
| | re you claiming a homestead exemption of Subject to adjustment on 4/01/19 and every 3 No Yes. Did you acquire the property covered No Yes | B years after that for ca | ses fi | , | , |

| Fill in this infor | mation to identify your case: | | | | |
|--|---|--|--------------------------|--|--|
| Debtor 1 | | | | | |
| Debtor 2 | First Name Dessie J Hughes | Middle Name | L | ast Name | |
| (Spouse if, filing) | | Middle Name | L | ast Name | |
| United States Ba | ankruptcy Court for the: WES | TERN DISTRICT OF M | IICHIO | GAN | |
| Case number _ | | | | | ☐ Check if this is an amended filing |
| Official Fo | orm 106C e C: The Prope | rty You Cla | ıim | as Exempt | 4/16 |
| the property you I | listed on <i>Schedule A/B: Property</i> and attach to this page as many c | (Official Form 106A/B) | as yo | our source, list the property that you | r supplying correct information. Using claim as exempt. If more space is additional pages, write your name and |
| specific dollar a any applicable s funds—may be u exemption to a p | mount as exempt. Alternativel tatutory limit. Some exemption unlimited in dollar amount. Ho | y, you may claim the f ns—such as those for wever, if you claim an | ull fai healt exen | th aids, rights to receive certain b nption of 100% of fair market valu | ing exempted up to the amount of enefits, and tax-exempt retirement |
| Part 1: Identi | ify the Property You Claim as I | Exempt | | | |
| 1. Which set o | f exemptions are you claiming | ? Check one only, eve | n if yo | our spouse is filing with you. | |
| ☐ You are c | laiming state and federal nonbar | nkruptcy exemptions. | 11 U.S | S.C. § 522(b)(3) | |
| ■ You are c | laiming federal exemptions. 11 | U.S.C. § 522(b)(2) | | | |
| | perty you list on Schedule A/E | - ,,,, | empt, | fill in the information below. | |
| | tion of the property and line on | Current value of the portion you own | Am | ount of the exemption you claim | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| | igerator, table & chairs, | \$5,000.00 | | \$2,500.00 | 11 U.S.C. § 522(d)(3) |
| shelving units, butcher block, table& chairs, hutch, couch, chair, cupboard, couch, chairs, ottamens, tables, tv, beds, dressers, washer, dryer, work table, 2 tables, stools, shevling racks, lawnmower, snowblower, misc Line from Schedule A/B: 6.1 | | | | 100% of fair market value, up to any applicable statutory limit | |
| - | 2 ipad, laptop hedule A/B: 7.1 | \$100.00 | | \$50.00 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(3) |
| 2 kayaks, 4 | 4 bikes, chedule A/B: 9.1 | \$300.00 | | \$150.00 | 11 U.S.C. § 522(d)(5) |

Official Form 106C

clothes

Line from Schedule A/B: 11.1

\$500.00

100% of fair market value, up to any applicable statutory limit

100% of fair market value, up to any applicable statutory limit

\$250.00

11 U.S.C. § 522(d)(3)

| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption | |
|--|---|--------------------------------------|--|---|------------------------------------|--|
| | | Copy the value from Schedule A/B | Check only one box for each exemption. | | | |
| | wedding rings, watch Line from Schedule A/B: 12.1 | \$3,000.00 | | \$1,500.00 | 11 U.S.C. § 522(d)(4) | |
| | Elle Holli Gohledale 772. Tall | | | 100% of fair market value, up to any applicable statutory limit | | |
| | Cash Line from Schedule A/B: 16.1 | \$20.00 | | \$10.00 | 11 U.S.C. § 522(d)(5) | |
| | | | | 100% of fair market value, up to any applicable statutory limit | | |
| | checking & savings: Lake Michigan Credit Union | \$2,000.00 | | \$2,000.00 | 11 U.S.C. § 522(d)(5) | |
| | Line from Schedule A/B: 17.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | health savings account: Health Equity - | \$3,400.00 | | \$3,400.00 | 11 U.S.C. § 522(d)(5) | |
| | Line from Schedule A/B: 17.4 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | checking: Huron Community Bank Line from Schedule A/B: 17.5 | \$4,200.00 | | \$4,200.00 | 11 U.S.C. § 522(d)(5) | |
| | | | | 100% of fair market value, up to any applicable statutory limit | | |
| | 403(B): MEA Financial Services -Michigan Office of Retirement | \$52,642.15 | | \$52,642.15 | 11 U.S.C. § 522(d)(12) | |
| | Services Line from Schedule A/B: 21.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | pension: Michigan Office of Retirement Services - future monthly | \$2,625.21 | | \$2,625.21 | 11 U.S.C. § 522(d)(10)(E) | |
| benefit July 25, 2018 Line from Schedule A/B: 21.2 | | | | 100% of fair market value, up to any applicable statutory limit | | |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every | | | ed on or after the date of adjustme | nt.) | |
| | ■ No | | | | | |
| | Yes. Did you acquire the property covered | ed by the exemption wi | thin 1 | 215 days before you filed this case | ? | |
| | □ No | | | | | |
| | ☐ Yes | | | | | |

Case:18-02908-swd Doc #:1 Filed: 06/29/2018 Page 24 of 77

| Fill in this informat | tion to identify you | r case: | | | | |
|--------------------------------------|---------------------------|--|----------------|-----------------------------------|--|-------------------|
| | | | | | | |
| Debtor 1 | Jeffery L Hughe | S Middle Name | Loot Nama | | | |
| Dobtor 2 | | | Last Name | | | |
| Debtor 2 (Spouse if, filing) | Dessie J Hughe | Middle Name | Last Name | | | |
| | | | | | | |
| United States Bankı | ruptcy Court for the: | WESTERN DISTRICT OF MIC | HIGAN | | | |
| Case number | | | | | | |
| (if known) | | | | | ☐ Check | if this is an |
| | | | | | amend | led filing |
| | | | | | | - |
| Official Form | <u>106D</u> | | | | | |
| Schedule D | : Creditors | Who Have Claims | Secure | ed by Property | V | 12/15 |
| Joneane B | . 0.04.0.0 | Time have claime | | | , | ,.0 |
| | | f two married people are filing togeth out, number the entries, and attach it | | | | |
| number (if known). | uullional Page, illi it C | out, number the entries, and attach it | to this form. | On the top of any addition | iai pages, write your nai | ne and case |
| 1. Do any creditors ha | ve claims secured by | your property? | | | | |
| ☐ No. Check th | is box and submit th | nis form to the court with your other | r schedules. | You have nothing else to | o report on this form. | |
| _ | | , | 00110001001 | . ou mayo mouning olde t | | |
| | Il of the information b | Delow. | | | | |
| Part 1: List All S | Secured Claims | | | 0-1 | Onlywer D | 0-1 |
| | | nore than one secured claim, list the cre | | | Column B | Column C |
| | | a particular claim, list the other creditor cal order according to the creditor's nam | | Amount of claim Do not deduct the | Value of collateral that supports this | Unsecured portion |
| | , | Ü | | value of collateral. | claim | if any |
| 2.1 Chase Auto | Finace | Describe the property that secures | | <u>\$24,703.51</u> | \$1.00 | \$24,702.51 |
| Creditor's Name | | 2016 Subaru Crosstrek 1300 | 00 miles | | | |
| | | leased vehicle | | | | |
| PO Box 901 | 076 | As of the date you file, the claim is: | Check all that | | | |
| Fort Worth, | | apply. Contingent | | | | |
| | ty, State & Zip Code | ☐ Unliquidated | | | | |
| , , | • | ☐ Disputed | | | | |
| Who owes the debt | ? Check one. | Nature of lien. Check all that apply. | | | | |
| Debtor 1 only | | An agreement you made (such as | mortgage or s | ecured | | |
| Debtor 2 only | | car loan) | 0 0 | | | |
| Debtor 1 and Debto | or 2 only | ☐ Statutory lien (such as tax lien, me | chanic's lien) | | | |
| ☐ At least one of the | debtors and another | ☐ Judgment lien from a lawsuit | | | | |
| ☐ Check if this clain | n relates to a | ☐ Other (including a right to offset) | | | | |
| community debt | | | | | | |
| Date debt was incurre | ed 2016 | Last 4 digits of account num | ber 6429 |) | | |
| | | | | | | |
| 2.2 Lemay Ente | rprises, LLC | Describe the property that secures | the claim: | \$52,844.07 | \$235,200.00 | \$9,612.85 |
| Creditor's Name | рооо, ш | 516 S Union St Traverse Cit | | | | 40,012.00 |
| | | 49684 Grand Traverse Cou | | | | |
| | | 3bdrm, 1 1/2 bath, 1350 sq f | t., city | | | |
| | | lot | | | | |
| | | SEV value As of the date you file, the claim is: | 01111-111 | | | |
| 501 Sixth St | | apply. | Check all that | | | |
| Traverse Cit | | ☐ Contingent | | | | |
| Number, Street, Cit | ty, State & Zip Code | Unliquidated | | | | |
| Who ower the delay | 2 Charles | Disputed | | | | |
| Who owes the debt | r Uneck one. | Nature of lien. Check all that apply. | | | | |
| Debtor 1 only | | An agreement you made (such as | mortgage or s | ecured | | |
| Debtor 2 only | | car loan) | ohaniala lian\ | | | |
| Debtor 1 and Debto | , | ☐ Statutory lien (such as tax lien, me | orianics lien) | | | |
| At least one of the | | Judgment lien from a lawsuit | Collatora | I Assignment of land | 1 Contract | |
| ☐ Check if this clain community debt | | Other (including a right to offset) | Conatera | i Assigninent di fant | a Contract | |

Official Form 106D

Case:18-02908-swd Doc #:1 Filed: 06/29/2018 Page 25 of 77

| Creditor's Name 516 S Union St Traverse City, MI 49684 Grand Traverse County 3bdrm, 1 1/2 bath, 1350 sq ft., city lot SEV value As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Who owes the debt? Check one. □ Debtor 1 only □ An agreement you made (such as mortgage or secured | Debtor 1 Jeffery L Hughes | | Case number (if know) | |
|---|--|---|---|-----------|
| Date debt was incurred 8/13/2015 Last 4 digits of account number Describe the property that secures the claim: \$191,968.78 \$235,200.00 \$0.00 Creditor's Name Describe the property that secures the claim: \$191,968.78 \$235,200.00 \$0.00 Security Alabama Straverse City, MI Alabama As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. Creditor's Name Describe the property that secures the claim: \$191,968.78 \$235,200.00 \$0.00 | | lame Last Name | | |
| Date debt was incurred 8/13/2015 Last 4 digits of account number Describe the property that secures the claim: \$191,968.78 \$235,200.00 \$0.00 Traverse City, MI 49684 Grand Traverse County 3bdrm, 1 1/2 bath, 1350 sq ft., city lot SEV value As of the date you file, the claim is: Check all that apply. Describe the property that secures the claim: \$191,968.78 \$235,200.00 \$0.00 \$0.00 \$0.00 Uniquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured) | | | | |
| 2.3 Rosemarie Farthing Describe the property that secures the claim: \$191,968.78 \$235,200.00 \$0.0 | First Name Middle N | lame Last Name | | |
| Creditor's Name 516 S Union St Traverse City, MI 49684 Grand Traverse County 3bdrm, 1 1/2 bath, 1350 sq ft., city lot SEV value As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Who owes the debt? Check one. □ Debtor 1 only □ An agreement you made (such as mortgage or secured | Date debt was incurred 8/13/2015 | Last 4 digits of account number | | |
| ## 49684 Grand Traverse County ## 3bdrm, 1 1/2 bath, 1350 sq ft., city ## Iot ## SEV value ## As of the date you file, the claim is: Check all that apply. ## Traverse City, MI 49686 Number, Street, City, State & Zip Code | | Describe the property that secures the claim: | \$191,968.78 \$235,200.00 | \$0.00 |
| Number, Street, City, State & Zip Code Number, Street, City, State & Zip Code □ Unliquidated □ Disputed Nature of lien. Check all that apply. □ Debtor 1 only □ An agreement you made (such as mortgage or secured | 512Terrace Rd | 49684 Grand Traverse County 3bdrm, 1 1/2 bath, 1350 sq ft., city lot SEV value As of the date you file, the claim is: Check all th apply. | nat | |
| □ Debtor 1 only ■ An agreement you made (such as mortgage or secured | | ☐ Unliquidated | | |
| — 7th agreement you made (sach as mongage of secured | Who owes the debt? Check one. | | | |
| Debtor 2 only car loan) | _ | | or secured | |
| ■ Debtor 1 and Debtor 2 only | ■ Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lie | en) | |
| ☐ At least one of the debtors and another ☐ Judgment lien from a lawsuit | ☐ At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | |
| Check if this claim relates to a community debt Other (including a right to offset) Inductor Inductor | | Other (including a right to offset) | ontract | |
| Date debt was incurred 2015 Last 4 digits of account number | Date debt was incurred 2015 | Last 4 digits of account number | | |
| Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. Write that number here: \$269,516.36 | | | | |
| Part 2: List Others to Be Notified for a Debt That You Already Listed | Part 2: List Others to Be Notified for | or a Debt That You Already Listed | | |
| Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. | trying to collect from you for a debt you of than one creditor for any of the debts that | owe to someone else, list the creditor in Part 1, a t you listed in Part 1, list the additional creditors | and then list the collection agency here. Similarly, if you | have more |
| Name, Number, Street, City, State & Zip Code Pamela Stanek On which line in Part 1 did you enter the creditor? 2.3 | | Zip Code Or | n which line in Part 1 did you enter the creditor? 2.3 | |
| Last 4 digits of account number | | La | ast 4 digits of account number | |

| Fill | l in this inform | ation to identify your o | case: | | | | | | | |
|------------|--------------------|------------------------------|----------------|--|------------|---------------|--------------------|--------------------|---------------|--------|
| De | btor 1 | Jeffery L Hughes | | | | | | | | |
| | | First Name | Middl | le Name | Last Name | • | | | | |
| | btor 2 | Dessie J Hughes First Name | Middl | le Name | Last Name | | | | | |
| (Spi | ouse if, filing) | First Name | | | | ; | | | | |
| Un | ited States Ban | kruptcy Court for the: | WESTER | RN DISTRICT OF MICHI | GAN | | | | | |
| Ca | se number | | | | | | | | | |
| | nown) | | | | | | | ☐ Check | if this is an | |
| | | | | | | | | amend | ed filing | |
| ○ f | ficial Form | 106E/E | | | | | | | | |
| | | | ho Hay | e Unsecured C | laim | | | | 12/15 | |
| | | | | | | | anaditana with NON | DDIODITY alaima Li | | |
| | | | | creditors with PRIORITY or result in a claim. Also list | | | | | | |
| | | | | (Official Form 106G). Do | | | | | | on the |
| | | | | perty. If more space is nee ve no information to repor | | | | | | |
| nam | e and case num | ber (if known). | | | | | | | | |
| | | of Your PRIORITY Un | | | | | | | | |
| 1. | _ ′ | s have priority unsecured | d claims aga | ainst you? | | | | | | |
| | | rt 2. | | | | | | | | |
| | Yes. | | | | | | | | | |
| 2. | | | | or has more than one priority ty and nonpriority amounts, | | | | | | |
| | , ,, | | | to the creditor's name. If you | | | | ' ' | | |
| | Part 1. If more th | nan one creditor holds a par | rticular claim | n, list the other creditors in P | art 3. | | | | | |
| | (For an explanat | ion of each type of claim, s | ee the instru | uctions for this form in the in: | struction | booklet.) | Total claim | Priority | Nonpriorit | v |
| | | | | | | | Total Gain | amount | amount | y |
| 2.1 | | | | Last 4 digits of account i | number | 3760 | \$18,516.21 | \$18,516.21 | | \$0.00 |
| | Priority Cred | ditor's Name | | When was the debt incur | rred? | 2016 | | | | |
| | | 75-5 phia, PA 19101-7317 | 7 | Which was the debt mean | iicu. | 2010 | | = | | |
| | Number Str | eet City State Zlp Code | | As of the date you file, th | ne claim | is: Check all | that apply | | | |
| | Who incurred | the debt? Check one. | | ☐ Contingent | | | | | | |
| | Debtor 1 on | nly | | ☐ Unliquidated | | | | | | |
| | Debtor 2 on | nly | | ☐ Disputed | | | | | | |
| | Debtor 1 an | nd Debtor 2 only | | Type of PRIORITY unsec | ured cla | im: | | | | |
| | ☐ At least one | of the debtors and anothe | ır | ☐ Domestic support oblig | ations | | | | | |
| | _ | is claim is for a commun | | Taxes and certain other | | ou owe the o | overnment | | | |
| | | ubject to offset? | iity debt | ☐ Claims for death or per | - | _ | | | | |
| | ■ No | | | Other. Specify | , | ,, | | | | |
| | ☐ Yes | | | | me tax | for 2016 | due | | | |
| _ | | | | | | | | | | |
| 2.2 | | | | Last 4 digits of account i | number | 3760 | \$27,058.16 | \$27,058.16 | | \$0.00 |
| | Priority Cred | ditor's Name | | When was the debt incur | rrad? | 2015 | | | | |
| | | 75-5 phia, PA 19101-7317 | 7 | Which was the debt mean | iicu. | 2013 | | - | | |
| | | eet City State Zlp Code | _ | As of the date you file, th | ne claim | is: Check all | that apply | | | |
| | Who incurred | the debt? Check one. | | ☐ Contingent | | | | | | |
| | ■ Debtor 1 on | nly | | ☐ Unliquidated | | | | | | |
| | Debtor 2 on | ıly | | ☐ Disputed | | | | | | |
| | Debtor 1 an | nd Debtor 2 only | | Type of PRIORITY unsec | ured cla | im: | | | | |
| | | of the debtors and anothe | er | ☐ Domestic support oblig | ations | | | | | |
| | _ | is claim is for a commun | | ■ Taxes and certain othe | er debts v | ou owe the o | overnment | | | |
| | | ubject to offset? | , | ☐ Claims for death or per | - | _ | | | | |
| | ■ No | - | | ☐ Other. Specify | , | , , | | | | |
| | ☐ Yes | | | | me tax | due for 2 | 2015 | | | |

Official Form 106 E/F

Case:18-02908-swd Doc #:1 Filed: 06/29/2018 Page 27 of 77

| | otor 1 Jeffery L Hughes Otor 2 Dessie J Hughes | | Case nu | umber (if know) | | |
|-----|--|--|-----------------|------------------|------------|------------|
| 2.3 | IRS | Last 4 digits of account number | 0493 | \$2,619.56 | \$2,619.56 | \$0.00 |
| | Priority Creditor's Name PO Box 7349 | When was the debt incurred? | 2016 | | | |
| | Philadelphia, PA 19101-7317 Number Street City State Zlp Code | As of the date you file, the claim | is: Chock all t | that apply | | |
| | Who incurred the debt? Check one. | Contingent | is. Check all | шасарріу | | |
| | ☐ Debtor 1 only | ☐ Unliquidated | | | | |
| | ■ Debtor 2 only | ☐ Disputed | | | | |
| | Debtor 1 and Debtor 2 only | Type of PRIORITY unsecured cla | ıim: | | | |
| | ☐ At least one of the debtors and another | ☐ Domestic support obligations | | | | |
| | ☐ Check if this claim is for a community debt | ■ Taxes and certain other debts y | rou owo the ar | overnment. | | |
| | Is the claim subject to offset? | Claims for death or personal inj | • | | | |
| | ■ No | Other. Specify | ary willo you | word intoxidated | | |
| | ☐ Yes | income tax | due for 2 | 016 | | |
| 2.4 | IRS | Last 4 digits of account number | 0493 | \$2,412.12 | \$0.00 | \$2,412.12 |
| | Priority Creditor's Name PO Box 7349 | When was the debt incurred? | 2015 | | | |
| | Philadelphia, PA 19101-7317 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all | that apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | , | | |
| | ☐ Debtor 1 only | ☐ Unliquidated | | | | |
| | Debtor 2 only | ☐ Disputed | | | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of PRIORITY unsecured cla | iim: | | | |
| | ☐ At least one of the debtors and another | ☐ Domestic support obligations | | | | |
| | ☐ Check if this claim is for a community debt | Taxes and certain other debts y | ou owe the ac | overnment | | |
| | Is the claim subject to offset? | ☐ Claims for death or personal injury while you were intoxicated | | | | |
| | ■ No | ☐ Other. Specify | | | | |
| | Yes | income tax | due for 2 | 015 | | |
| 2.5 | | Last 4 digits of account number | 3760 | \$273.00 | \$273.00 | \$0.00 |
| | Priority Creditor's Name PO Box 7346 | When was the debt incurred? | 2017 | | | |
| | Philadelphia, PA 19101 Number Street City State Zlp Code | As of the date you file, the claim | is: Chack all t | that apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | is. Offect all | шаг арргу | | |
| | ■ Debtor 1 only | ☐ Unliquidated | | | | |
| | Debtor 2 only | ☐ Disputed | | | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of PRIORITY unsecured cla | ıim: | | | |
| | ☐ At least one of the debtors and another | ☐ Domestic support obligations | | | | |
| | ☐ Check if this claim is for a community debt | | | | | |
| | Is the claim subject to offset? | ☐ Claims for death or personal inj | _ | | | |
| | No | Other. Specify | , you | | | |
| | □Yes | | ome tax o | wed for 2017 | | |
| | | | | | | |

Case:18-02908-swd Doc #:1 Filed: 06/29/2018 Page 28 of 77

| Debto Debto | or 1 Jeffery L Hughes Dessie J Hughes | | Case n | umber (if know) | | |
|----------------|--|------------------------------------|---------------|----------------------|--------|-------------|
| 2.6 | IRS Priority Creditor's Name | Last 4 digits of account number | 3760 | \$4,796.07 | \$0.00 | \$4,796.07 |
| | PO Box 7349 Philadelphia, PA 19101-7317 | When was the debt incurred? | 2011 | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all | that apply | | |
| ٧ | Who incurred the debt? Check one. | ☐ Contingent | | | | |
| [| Debtor 1 only | ☐ Unliquidated | | | | |
| [| Debtor 2 only | ☐ Disputed | | | | |
| ı | Debtor 1 and Debtor 2 only | Type of PRIORITY unsecured cla | im: | | | |
| [| ☐ At least one of the debtors and another | ☐ Domestic support obligations | | | | |
| [| ☐ Check if this claim is for a community debt | ■ Taxes and certain other debts y | ou owe the c | overnment | | |
| | s the claim subject to offset? | ☐ Claims for death or personal inj | _ | | | |
| ı | No | Other. Specify | | | | |
| [| ☐Yes | 1040 taxes | for 2011, | | | |
| | | Date of ass | sessment | 11/19/2012 | | |
| 2.7 | IRS | Last 4 digits of account number | 3760 | \$21,480.64 | \$0.00 | \$21,480.64 |
| | Priority Creditor's Name PO Box 7349 Philadelphia, PA 19101-7317 | When was the debt incurred? | 2012 | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all | that apply | | |
| ٧ | Who incurred the debt? Check one. | ☐ Contingent | | | | |
| [| Debtor 1 only | ☐ Unliquidated | | | | |
| [| Debtor 2 only | | | | | |
| I | Debtor 1 and Debtor 2 only | Type of PRIORITY unsecured cla | im: | | | |
| [| \square At least one of the debtors and another | ☐ Domestic support obligations | | | | |
| [| \square Check if this claim is for a community debt | Taxes and certain other debts y | ou owe the g | government | | |
| l | s the claim subject to offset? | Claims for death or personal inj | ury while you | were intoxicated | | |
| | No | Other. Specify | | | | |
| [| ☐ Yes | 1040 taxes Date of As | | 2012 1 10/21/2013 | | |
| 2.8 | IRS Priority Creditor's Name | Last 4 digits of account number | 3760 | \$35,362.79 | \$0.00 | \$35,362.79 |
| | PO Box 7349 Philadelphia, PA 19101-7317 | When was the debt incurred? | 2013 | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all | that apply | | |
| V | Who incurred the debt? Check one. | ☐ Contingent | | | | |
| [| Debtor 1 only | ☐ Unliquidated | | | | |
| [| Debtor 2 only | ☐ Disputed | | | | |
| ı | Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim: | | | | | |
| [| ☐ At least one of the debtors and another ☐ Domestic support obligations | | | | | |
| [| ☐ Check if this claim is for a community debt ■ Taxes and certain other debts you owe the government | | | | | |
| l | s the claim subject to offset? | Claims for death or personal inj | ury while you | were intoxicated | | |
| | No | Other. Specify | | | | |
| [| Yes | 1040 taxes date of ass | | 2013 11/24/2014 | | |

Case:18-02908-swd Doc #:1 Filed: 06/29/2018 Page 29 of 77

| Debtor 1 Jeffery L Hughes Debtor 2 Dessie J Hughes | | Case n | umber (_{if know}) | | |
|--|--|-----------------------|------------------------------|------------|-------------|
| 2.9 IRS Priority Creditor's Name PO Box 7349 Philadelphia, PA 19101-7317 Number Street City State Zlp Code Who incurred the debt? Check one. | Last 4 digits of account number When was the debt incurred? As of the date you file, the claim i ☐ Contingent | 2014 | \$13,617.00 that apply | \$0.00 | \$13,617.00 |
| Debtor 1 only | ☐ Unliquidated | | | | |
| Debtor 2 only | Disputed | | | | |
| Debtor 1 and Debtor 2 only | Type of PRIORITY unsecured clai | im: | | | |
| ☐ At least one of the debtors and another | ☐ Domestic support obligations | | | | |
| ☐ Check if this claim is for a community debt | ■ Taxes and certain other debts ye | ou owe the o | overnment | | |
| Is the claim subject to offset? | ☐ Claims for death or personal inju | _ | | | |
| ■ No | Other. Specify | | | | |
| Yes | 1040 tax fo | r 2014 | | | |
| MI Dept of Treasury | Last 4 digits of account number | | \$3,426.39 | \$3,426.39 | \$0.00 |
| Priority Creditor's Name Office of Collections PO Box 30199 | When was the debt incurred? | 12/15 | | | |
| Lansing, MI 48909 Number Street City State Zlp Code | As of the date you file, the claim i | is: Check all | that apply | | |
| Who incurred the debt? Check one. | ☐ Contingent | | | | |
| Debtor 1 only | ☐ Unliquidated | | | | |
| ☐ Debtor 2 only | Disputed | | | | |
| ■ Debtor 1 and Debtor 2 only | Type of PRIORITY unsecured clai | im: | | | |
| ☐ At least one of the debtors and another | ☐ Domestic support obligations | | | | |
| ☐ Check if this claim is for a community debt | Taxes and certain other debts you owe the government | | | | |
| Is the claim subject to offset? | ☐ Claims for death or personal inju | ıry while you | were intoxicated | | |
| ■ No | Other. Specify | | | | |
| ☐ Yes | MI 1040 | | | | |
| 2.1 MI Dept of Treasury Priority Creditor's Name | Last 4 digits of account number | | \$4,407.51 | \$4,407.51 | \$0.00 |
| Office of Collections PO Box 30199 Lansing, MI 48909 | When was the debt incurred? | 12/16 | | | |
| Number Street City State Zlp Code | As of the date you file, the claim i | i s: Check all | that apply | | |
| Who incurred the debt? Check one. | ☐ Contingent | | | | |
| ☐ Debtor 1 only | ☐ Unliquidated | | | | |
| ☐ Debtor 2 only | ☐ Disputed | | | | |
| ■ Debtor 1 and Debtor 2 only | Type of PRIORITY unsecured clai | im: | | | |
| \square At least one of the debtors and another | ☐ Domestic support obligations | | | | |
| \square Check if this claim is for a community debt | Taxes and certain other debts ye | _ | | | |
| Is the claim subject to offset? | Claims for death or personal inju | ıry while you | were intoxicated | | |
| ■ No □ Yes | Other. Specify | | | | |
| | MI 1040 | | | | |
| Part 2: List All of Your NONPRIORITY Unsecu | | | | | |
| 3. Do any creditors have nonpriority unsecured clain | - | | | | |
| ☐ No. You have nothing to report in this part. Submit | this form to the court with your other s | chedules. | | | |
| ■ Yes. | | | | | |

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more

Case:18-02908-swd Doc #:1 Filed: 06/29/2018 Page 30 of 77

| | Jeffery L Hughes Dessie J Hughes | Case number (if know) | | |
|-----|--|---|---|----------------------|
| | n one creditor holds a particular claim, list the other t 2. | creditors in Part 3.If you have more than | three nonpriority unsecured claims fill out the | Continuation Page of |
| | | | | Total claim |
| 4.1 | American Express | Last 4 digits of account number | 1002 | \$5,975.19 |
| | Nonpriority Creditor's Name P.O. Box 297885 Et Laudordalo, El 22220, 7885 | When was the debt incurred? | 2010 | - |
| | Ft Lauderdale, FL 33329-7885 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | Other. Specify household | credit card | - |
| 4.2 | American Express Nonpriority Creditor's Name | Last 4 digits of account number | x006 | \$872.11 |
| | PO Box 981535 | When was the debt incurred? | 2011 | - |
| | El Paso, TX 79998 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a sepa | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | No | Debts to pension or profit-sharin | | |
| | Yes | Other. Specify household | credit card | - |
| 4.3 | Ark Electric | Last 4 digits of account number | 3312 | \$3,248.99 |
| | Nonpriority Creditor's Name PO Box 6943 | When was the debt incurred? | 2015 | - |
| | Traverse City, MI 49696 Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check one. | , | or one of an anal appry | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt | Obligations arising out of a sepa | | |
| | Is the claim subject to offset? | report as priority claims Debts to pension or profit-sharin | | |
| | | · · | • | |
| | ☐ Yes | Other. Specify electrical se | _ | |

Case:18-02908-swd Doc #:1 Filed: 06/29/2018 Page 31 of 77

| Nonpriority Creditor's Name 6211 S. Railway Cmn Williamsburg, MI 49690 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify | Inknown |
|--|----------|
| Nonpriority Creditor's Name 6211 S. Railway Cmn Williamsburg, MI 49690 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt stee claim subject to offset? No Check if this claim is for a community debt stee claim subject to offset? No Check if this claim is for a community debt stee claim subject to offset? No Check if this claim is for a community debt stee claim subject to offset? No Check if this claim is for a community debt stee claim subject to offset? Nonpriority Creditor's Name 138 N. Meramec Ave Saint Louis, MO 63105 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Check if this claim is for a community debt Disputed Type of NONPRIORITY unsecured claim: Check if this claim is for a community debt Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply Uniquidated Disputed Type of NoNPRIORITY unsecured claim: Check if this claim is for a community debt Disputed Type of NoNPRIORITY unsecured claim: Check if this claim is for a community debt Disputed Type of NoNPRIORITY unsecured claim: Check if this claim is for a community debt Disputed Type of NoNPRIORITY unsecured claim: Check file the debt incurred? As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Brownwood Investors, LLC Nonpriority Creditor's Name 138 N. Meramec Ave Saint Louis, MO 63105 Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Student loans Dobligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Student loans Dobligations arising out of a separation agreement or divorce that you did not a separation agreement or divorce that you did not debt | |
| Debtor 2 only Debtor 1 and Debtor 2 only Check if this claim is for a community debt Is the claim subject to offset? No Debtor 1 and Debtor 2 only No Debtor 2 only No Debtor 3 only No Debtor 4 only No Debtor 5 only No Debtor 6 only No Debtor 7 only No Debtor 7 only No Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Disputed Type of NoNPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Unliquidated When was the debt incurred? As of the date you file, the claim is: Check all that apply Unliquidated Disputed Type of NoNPRIORITY unsecured claim: Student loans Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not | |
| Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Check if subject to offset? Other. Specify Brownwood Investors, LLC Nonpriority Creditor's Name 138 N. Meramec Ave Saint Louis, MO 63105 Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Check if this claim is for a community debt Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Other. Specify Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not | |
| At least one of the debtors and another Check if this claim is for a community debt Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify | |
| Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Unify Creditor's Name 138 N. Meramec Ave Saint Louis, MO 63105 Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Student loans Disputed Disputed Type of NONPRIORITY unsecured claim: Student loans Disputed on a separation agreement or divorce that you did not report as priority claims Debtor 1 or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts When was the debt incurred? Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Disputed Type of NONPRIORITY unsecured claim: Student loans Disputed Type of NONPRIORITY unsecured claim: Student loans Disputed on the debt or a separation agreement or divorce that you did not | |
| debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Other. Specify Debts to pension or profit-sharing plans, and other similar debts Other. Specify Last 4 digits of account number When was the debt incurred? Saint Louis, MO 63105 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not report as priority claims U Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not | |
| Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Other. Specify Debts to pension or profit-sharing plans, and other similar debts Other. Specify Uses Brownwood Investors, LLC Nonpriority Creditor's Name 138 N. Meramec Ave Saint Louis, MO 63105 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Other. Specify Uses When was the debt incurred? As of the date you file, the claim is: Check all that apply Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not | |
| Yes | |
| A.5 Brownwood Investors, LLC Nonpriority Creditor's Name 138 N. Meramec Ave Saint Louis, MO 63105 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated | |
| Nonpriority Creditor's Name 138 N. Meramec Ave Saint Louis, MO 63105 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt When was the debt incurred? As of the date you file, the claim is: Check all that apply Unliquidated Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not | |
| Saint Louis, MO 63105 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not | Inknown |
| Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not | |
| □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not | |
| □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not | |
| Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not | |
| ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| ☐ Check if this claim is for a community debt ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| debt ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | |
| ■ No □ Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes ☐ Other. Specify | |
| 4.6 Capital One Bank Last 4 digits of account number 9209 \$ | 3,799.23 |
| Nonpriority Creditor's Name | |
| P.O. Box 85617 When was the debt incurred? 2009 Richmond, VA 23285-5617 | |
| Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | |
| ☐ Debtor 1 only ☐ Contingent | |
| ■ Debtor 2 only □ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only ☐ Disputed | |
| ☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community ☐ Student loans | |
| debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No □ Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes ☐ Other. Specify household credit card | |

| | r 1 Jeffery L Hughes r 2 Dessie J Hughes | Case number (if know) | | | |
|-----|---|---|------------|--|--|
| 4.7 | Carol H. Vittert Nonpriority Creditor's Name | Last 4 digits of account number | Unknown | | |
| | 750 S. Price Rd. Saint Louis. MO 63124 | When was the debt incurred? | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | |
| | ☐ Debtor 2 only | Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ■ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | | |
| | Yes | Other. Specify | | | |
| 4.8 | Cavalry SPV I, LLC Nonpriority Creditor's Name | Last 4 digits of account number | \$2,870.00 | | |
| | c/o Roosen, Varchetti & Oliver PO Box 2305 | When was the debt incurred? 2016 | | | |
| | Mount Clemens, MI 48046 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | |
| | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | | |
| | Yes | Other. Specify household credit card | | | |
| 4.9 | Chase | Last 4 digits of account number 7349 | \$1,923.51 | | |
| | Nonpriority Creditor's Name P.O. Box 15836 | When was the debt incurred? 2007 | | | |
| | Wilmington, DE 19886-5836 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | | |
| | Who incurred the debt? Check one. | , | | | |
| | ☐ Debtor 1 only | ☐ Contingent | | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | □ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | | |
| | □Yes | Other. Specify household credit card | | | |

Case:18-02908-swd Doc #:1 Filed: 06/29/2018 Page 33 of 77

| Debt Debt | or 1 Jeffery L Hughes or 2 Dessie J Hughes | | Case number (if know) | | |
|--------------|---|--|---|------------|--|
| 4.1 0 | Chase Bank | Last 4 digits of account number | 1641 | \$8,830.64 | |
| | Nonpriority Creditor's Name PO Box 15548 | When was the debt incurred? | 2010 | | |
| | Wilmington, DE 19886-5548 Number Street City State Zlp Code | As of the date you file, the claim | | | |
| | Who incurred the debt? Check one. | | | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | Debtor 1 and Debtor 2 only | Disputed | | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | |
| | ☐ Yes | Other. Specify household | credit card | | |
| 4.1 1 | Citi Card Credit Services | Last 4 digits of account number | 3364 | \$4,322.44 | |
| | Nonpriority Creditor's Name Centralized Bankruptcy PO Box 20507 | When was the debt incurred? | 2010 | | |
| | Kansas City, MO 64195 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | | |
| | ☐ Debtor 1 only | ☐ Contingent | | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | | | |
| | ■ No | Debts to pension or profit-sharing | | | |
| | Yes | Other. Specify household credit card | | | |
| 4.1 | Comenity - Wayfair | Last 4 digits of account number | 7294 | \$374.66 | |
| | Nonpriority Creditor's Name Bankruptcy Dept PO Box 182125 | When was the debt incurred? | 2016 | | |
| | Columbus, OH 43218 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | |
| | ☐ Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | | | |
| | ☐ Check if this claim is for a community debt | Student loans | aration agreement or divorce that you did not | | |
| | Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | | | |
| | ■ No | Debts to pension or profit-sharing | | | |
| | ☐Yes | ■ Other. Specify household | credit card | | |

Case:18-02908-swd Doc #:1 Filed: 06/29/2018 Page 34 of 77

| Debte Debte | or 1 Jeffery L Hughes or 2 Dessie J Hughes | Case number (if know) | | | |
|----------------|--|--|-------------|--|--|
| 4.1 3 | Howard A. & Helen K. Hughes | Last 4 digits of account number | \$10,298.77 | | |
| | Nonpriority Creditor's Name 3159 Scenic Hills Dr. Williamsburg, MI 49690 | When was the debt incurred? 2016 | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | | |
| | ☐ Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | | |
| | Yes | Other. Specify unsecured note | | | |
| 4.1 4 | John C. Hamaty Nonpriority Creditor's Name | Last 4 digits of account number | \$20,000.00 | | |
| | 780 Oakland Ave Birmingham, MI 48009 | When was the debt incurred? 2016 | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | | | |
| | Yes | Other. Specify unsecured note | | | |
| 4.1 5 | Leland H. Vittert Nonpriority Creditor's Name | Last 4 digits of account number | Unknown | | |
| | 3656 N. Manitou Trl W. Leland, MI 49654 | When was the debt incurred? | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ■ Unliquidated | | | |
| | Debtor 1 and Debtor 2 only | Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | | | |
| | ☐ Yes | Other. Specify | | | |

Case:18-02908-swd Doc #:1 Filed: 06/29/2018 Page 35 of 77

| Debt Debt | or 1 Jeffery L Hughes or 2 Dessie J Hughes | Case number (if know) | | | | |
|--------------|--|--|-------------|--|--|--|
| 4.1 6 | Lending Club | Last 4 digits of account number XX | \$22,604.00 | | | |
| | Nonpriority Creditor's Name 71 Stevenson Street, Suite 300 San Francisco, CA 94105 | When was the debt incurred? | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | | | |
| | Debtor 1 only | ☐ Contingent | | | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ■ Disputed | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | Yes | ■ Other Specify debt consolidation program | | | | |
| 4.1 7 | Macy's | Last 4 digits of account number 4344 | \$1,831.40 | | | |
| | Nonpriority Creditor's Name box 8218 Mason, OH 45040 | When was the debt incurred? 2010 | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | | | |
| | ☐ Debtor 1 only | ☐ Contingent | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | □ Disputed | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | |
| | debt Is the claim subject to offset? | $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | Yes | ■ Other. Specify HOUSEHOLD CREDIT CARD | | | | |
| 4.1 8 | Mark B. Vittert Nonpriority Creditor's Name | Last 4 digits of account number | Unknown | | | |
| | 3656 N. Manitou Trl W Leland, MI 49654 | When was the debt incurred? | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | |
| | Debtor 2 only | Unliquidated | | | | |
| | Debtor 1 and Debtor 2 only | ■ Disputed | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | |
| | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | Yes | Other. Specify | | | | |

| Debto Debto | or 1 Jeffery L Hughes or 2 Dessie J Hughes | | Case number (if know) | | |
|----------------|--|---|---|------------|--|
| 4.1 9 | PNC Bank | Last 4 digits of account number | 2550 | \$7,376.72 | |
| | Nonpriority Creditor's Name One PNC Plaza 249 Fifth Avenue Pittsburgh, PA 15222 | When was the debt incurred? 2007 | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | | |
| | ☐ Debtor 1 only | ☐ Contingent | | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a sepa | | | |
| | Is the claim subject to offset? | report as priority claims | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | |
| | Yes | Other. Specify household | credit card | | |
| 4.2 0 | Synchrony Bank | Last 4 digits of account number | | \$2,920.34 | |
| | Nonpriority Creditor's Name Att Bankruptcy Dept PO box 965060 Orlando, FL 32896-5060 | When was the debt incurred? | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a sepa | | | |
| | Is the claim subject to offset? | report as priority claims | | | |
| | ■ No | · | ☐ Debts to pension or profit-sharing plans, and other similar debts | | |
| | Yes | Other. Specify household | credit card | | |
| 4.2 1 | Traverse City Golf & Country Nonpriority Creditor's Name | Last 4 digits of account number | x326 | \$8,184.87 | |
| | 1725 S. Union St. Traverse City, MI 49684 | When was the debt incurred? | 2016 | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | Debtor 1 and Debtor 2 only | □ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans☐ Obligations arising out of a sepa | ration agreement or divorce that you did not | | |
| | Is the claim subject to offset? | report as priority claims | · · | | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | | |
| | ☐ Yes | Other. Specify membersh | p fees | | |

Case:18-02908-swd Doc #:1 Filed: 06/29/2018 Page 37 of 77

| | or 1 Jeffery L Hughes or 2 Dessie J Hughes | | Case number (if know) | |
|----------|--|--|---|-------------|
| 4.2 2 | Traverse City State Bank | Last 4 digits of account number | 0877 | \$4,939.74 |
| | Nonpriority Creditor's Name 310 W. Front St. PO Box 1047 Traverse City, MI 49685 | When was the debt incurred? | 2010 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify household | credit card | |
| 4.2 | US Department of Education Nonpriority Creditor's Name | Last 4 digits of account number | 0489 | \$69,881.70 |
| | PO Box 69184 Harrisburg, PA 17106 | When was the debt incurred? | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | ☐ Yes | Other. Specify | | |
| | | parent plus | student loans | |
| 4.2 4 | US Department of Education | Last 4 digits of account number | | \$67,866.73 |
| | Nonpriority Creditor's Name PO Box 69184 Harrisburg, PA 17106 | When was the debt incurred? | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | □ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | ☐ Yes | Other. Specify | | |
| | | | s student loan | |

| | Jeffery L Hughes Dessie J Hughes | | Case number (if know) | |
|--------------------|--|---|--|---------------------------|
| | | | | |
| D | VDL Certified Public Accountan | Last 4 digits of account number | 1039 | \$3,144.33 |
| | Nonpriority Creditor's Name 1240 E 8th St. | When was the debt incurred? | 2017 | _ |
| | Traverse City, MI 49686 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | | onesit an anat apply | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | ed claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt | | aration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | No | Debts to pension or profit-shari | | |
| | ☐ Yes | Other. Specify profession | al services | _ |
| Part 3: | List Others to Be Notified About a De | ebt That You Already Listed | | |
| is tryin have m | s page only if you have others to be notified g to collect from you for a debt you owe to s lore than one creditor for any of the debts th d for any debts in Parts 1 or 2, do not fill out | omeone else, list the original creditor in at you listed in Parts 1 or 2, list the add | n Parts 1 or 2, then list the collection agend | y here. Similarly, if you |
| | d Address | On which entry in Part 1 or Part 2 did you | _ | |
| | ircuit Court ashington St | <u> </u> | Part 1: Creditors with Priority Unsecured Cla | |
| Ste 300 | | • | Part 2: Creditors with Nonpriority Unsecured | d Claims |
| Traver | se City, MI 49684 | | | |
| | | Last 4 digits of account number | | |
| | d Address istrict Ct. | On which entry in Part 1 or Part 2 did you | _ | |
| | ashington St., Ste. 114C | | Part 1: Creditors with Priority Unsecured Cla | |
| | se City, MI 49684 | | Part 2: Creditors with Nonpriority Unsecured | d Claims |
| | | Last 4 digits of account number | | |
| | d Address | On which entry in Part 1 or Part 2 did you | _ | |
| | istrict Ct. ashington St., Ste. 114C | | Part 1: Creditors with Priority Unsecured Cla | |
| | se City, MI 49684 | • | Part 2: Creditors with Nonpriority Unsecured | Claims |
| | | Last 4 digits of account number | | |
| | d Address Services, Inc | On which entry in Part 1 or Part 2 did you Line 4.10 of (<i>Check one</i>): | ulist the original creditor? Part 1: Creditors with Priority Unsecured Cla | aims |
| | arry Truman Blvd. | | Part 2: Creditors with Nonpriority Unsecured | d Claims |
| Saint | Charles, MO 63301-4047 | Last 4 digits of account number | | |
| N | | - | F. H. C. L. F. O. | |
| MRS | d Address | On which entry in Part 1 or Part 2 did you Line 4.10 of (<i>Check one</i>): | Just the original creditor? Part 1: Creditors with Priority Unsecured Cla | aims |
| | Iney Ave | | Part 2: Creditors with Nonpriority Unsecured | |
| Cherry | Hill, NJ 08003 | Last 4 digits of account number | - 1 art 2. Groundro with Homphority Griddouroe | 2 Olaimo |
| | | Last 4 digits of account number | | |
| | d Address | On which entry in Part 1 or Part 2 did you | | |
| | ssociates of New Jersey Iney Ave | | Part 1: Creditors with Priority Unsecured Cla | |
| | Hill, NJ 08003 | | Part 2: Creditors with Nonpriority Unsecured | d Ciaims |
| | | Last 4 digits of account number | | |
| | d Address | On which entry in Part 1 or Part 2 did you | _ | |
| | Bzdok & Howard | | Part 1: Creditors with Priority Unsecured Cla | |
| 420 E. | eys at Law Front St. | • | Part 2: Creditors with Nonpriority Unsecured | d Claims |
| iiaver | se City, MI 49686 | Last 4 digits of account number | | |

Case:18-02908-swd Doc #:1 Filed: 06/29/2018 Page 39 of 77

| Debtor 2 Dessie J Hughes Debtor 2 Dessie J Hughes | | Case number (if know) |
|--|---|---|
| Name and Address | On which entry in Part 1 or Part 2 | 2 did you list the original creditor? |
| Roosen, Varchetti & Olivier | Line 4.20 of (<i>Check one</i>): | ☐ Part 1: Creditors with Priority Unsecured Claims |
| Attorneys at Law PO Box 2305 Mount Clemens, MI 48046 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims |
| mount cromone, and record | Last 4 digits of account number | |
| Name and Address | On which entry in Part 1 or Part 2 | 2 did you list the original creditor? |
| Smith Haughey Rice & Roegge | Line 4.13 of (<i>Check one</i>): | ☐ Part 1: Creditors with Priority Unsecured Claims |
| 101 N. Park Ste., Ste 200 Traverse City, MI 49684 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims |
| •, | Last 4 digits of account number | |

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|--------------|-----|---|-----|------------------|
| | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| Total claims | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 133,969.45 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 133,969.45 |
| | | | | Total Claim |
| | 6f. | Student loans | 6f. | \$ 137,748.43 |
| Total claims | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 113,516.94 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 251,265.37 |

Case:18-02908-swd Doc #:1 Filed: 06/29/2018 Page 40 of 77

| Fill in this infor | mation to identify your | case: | | |
|---------------------|--------------------------|------------------|-------------|---------------|
| Debtor 1 | Jeffery L Hughes | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Dessie J Hughes | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | WESTERN DISTRICT | OF MICHIGAN | |
| Case number | | | | |
| (if known) | | | | Check if this |
| | | | | amended filir |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 LaFayette Realty
1220 LaFayette
Denver, CO 80218

State what the contract or lease is for
lease agreement - co-debtor is the tenant

Case:18-02908-swd Doc #:1 Filed: 06/29/2018 Page 41 of 77

| | | | | _ | |
|--------------------------------|--|------------------------------|--------------------------|--|--|
| Fill in this | information to identify you | ır case: | | | |
| Debtor 1 | Jeffery L Hughe | es | | | |
| Dahtan 0 | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing | Dessie J Hughe First Name | Middle Name | Last Name | | |
| United State | es Bankruptcy Court for the: | WESTERN DISTRICT | OF MICHIGAN | | |
| Case numb | nor. | | | | |
| (if known) | | | | | ☐ Check if this is an amended filing |
| Official | Form 106H | | | | |
| | ule H: Your Co | dehtors | | | 12/15 |
| Ocnica | alc II. Ioal oo | ucbioi 3 | | | 12/13 |
| | and case number (if know ou have any codebtors? (| , , , | | as a codebtor. | |
| ■ No | | | | | |
| ☐ Yes | | | | | |
| 0 14/14/5 | in the leat Overen bears w | lived in a semention | | | to atataa anal tamitaniaa in alonda |
| | a, California, Idaho, Louisian | | | | ty states and territories include) |
| = | | | | | |
| _ | Go to line 3. Did your spouse, former sp | ouse or legal equivalent li | ve with you at the time? | | |
| □ 163. | Dia your spouse, former sp | ouse, or legal equivalent ii | ve with you at the time: | | |
| in line Form 1 out Co | 2 again as a codebtor only 106D), Schedule E/F (Offici lumn 2. | / if that person is a guara | intor or cosigner. Make | sure you have listed t 6G). Use Schedule D, | ng with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill |
| | Column 1: Your codebtor lame, Number, Street, City, State and | ZIP Code | | Check all schedul | editor to whom you owe the debt es that apply: |
| 3.1 | | | | ☐ Schedule D, lir | ne |
| | Name | | | □ Schedule E/F, | |
| | | | | ☐ Schedule G, lir | ne |
| | Number Street | | | <u> </u> | |
| | City | State | ZIP Code | | |
| 3.2 | | | | ☐ Schedule D, lir | 00 |
| | Name | | | _ ☐ Schedule E/F, | |
| | | | | ☐ Schedule G, lir | |
| <u> </u> | Number Street | | | _ | |
| C | City | State | ZIP Code | | |

| Der | otor 1 | | all a a | | |
|-------------------------------|--|--|--|---|---|
| Det | Je | ffery L Hu | ignes | | |
| | otor 2 use, if filing) | ssie J Hu | ghes | | |
| Uni | ed States Bankruptcy C | Court for the | : WESTERN DISTRICT | T OF MICHIGAN | |
| | e number | | | - | Check if this is: |
| (IT KI | own) | | | | An amended filing |
| | | | | | ☐ A supplement showing postpetition chapter 13 income as of the following date: |
| | ficial Form 10 | | | | MM / DD/ YYYY |
| S | chedule I: Yo | ur Inc | omo | | 12/15 |
| Be a | s complete and accurablying correct informatiuse. If you are separate | ate as poss tion. If you ed and you | sible. If two married peo are married and not fili or spouse is not filing wi | ng jointly, and your spouse is liv ith you, do not include information | and Debtor 2), both are equally responsible for ing with you, include information about your on about your spouse. If more space is needed, case number (if known). Answer every question. |
| Be a | s complete and accur- blying correct informations. If you are separate the a separate sheet to Describe Em Fill in your employments | ate as position. If you ed and you this form. | sible. If two married peo are married and not fili or spouse is not filing wi | ng jointly, and your spouse is liv ith you, do not include informatio onal pages, write your name and | and Debtor 2), both are equally responsible for ing with you, include information about your on about your spouse. If more space is needed, case number (if known). Answer every question. |
| Be a supp spon attac | s complete and accur- blying correct informatuse. If you are separate ch a separate sheet to Describe Em | ate as position. If you ed and you this form. | sible. If two married peo are married and not fili or spouse is not filing wi | ng jointly, and your spouse is liv ith you, do not include informational onal pages, write your name and Debtor 1 | and Debtor 2), both are equally responsible for ng with you, include information about your on about your spouse. If more space is needed, case number (if known). Answer every question. Debtor 2 or non-filing spouse |
| Be a supp spon attac | s complete and accur- blying correct informative. If you are separate the a separate sheet to t1: Describe Em Fill in your employment information. If you have more than | ate as possition. If you ed and you this form. aployment ent one job, | sible. If two married peo are married and not fili ir spouse is not filing wi On the top of any additi | ng jointly, and your spouse is liv ith you, do not include information onal pages, write your name and | and Debtor 2), both are equally responsible for ing with you, include information about your on about your spouse. If more space is needed, case number (if known). Answer every question. |
| Be a supp spon attac | s complete and accur- blying correct informationse. If you are separate the a separate sheet to t1: Describe Em Fill in your employment information. If you have more than attach a separate page information about additional information and information about additional information and information about additional information and information and information and information about additional information and information a | ate as possition. If you ed and you this form. aployment ent one job, e with | sible. If two married peo are married and not fili or spouse is not filing wi | ng jointly, and your spouse is liv ith you, do not include informational onal pages, write your name and Debtor 1 | and Debtor 2), both are equally responsible for ng with you, include information about your on about your spouse. If more space is needed, case number (if known). Answer every question. Debtor 2 or non-filing spouse |
| Be a supp spon attac | s complete and accur- blying correct informative. If you are separate to a separate sheet to tell. Describe Em Fill in your employment information. If you have more than attach a separate page. | ate as possition. If you ed and you this form. aployment ent one job, e with | sible. If two married peo are married and not fili ir spouse is not filing wi On the top of any additi | ng jointly, and your spouse is livith you, do not include informational pages, write your name and Debtor 1 Employed | and Debtor 2), both are equally responsible for ing with you, include information about your on about your spouse. If more space is needed, case number (if known). Answer every question. Debtor 2 or non-filing spouse |
| Be a supp spon attac | s complete and accur- blying correct informationse. If you are separate the a separate sheet to t1: Describe Em Fill in your employment information. If you have more than attach a separate page information about additional information and information about additional information and information about additional information and information and information and information about additional information and information a | ate as possition. If you ed and you this form. aployment ent one job, e with itional | sible. If two married peo are married and not filin ir spouse is not filing wi On the top of any additi | ng jointly, and your spouse is livith you, do not include informational pages, write your name and Debtor 1 Employed Not employed | and Debtor 2), both are equally responsible for ing with you, include information about your on about your spouse. If more space is needed, case number (if known). Answer every question. Debtor 2 or non-filing spouse Employed Not employed |
| Be a supp spon attac | s complete and accurablying correct informatuse. If you are separate to a separate sheet to Describe Em Fill in your employment information. If you have more than attach a separate page information about additionably employers. Include part-time, sease | ate as possition. If you ed and you this form. aployment ent one job, e with itional sonal, or de student | sible. If two married peo are married and not filing ir spouse is not filing wi On the top of any additi Employment status | pg jointly, and your spouse is livith you, do not include informational pages, write your name and Debtor 1 Employed Not employed self-employed | and Debtor 2), both are equally responsible for ng with you, include information about your on about your spouse. If more space is needed, case number (if known). Answer every question. Debtor 2 or non-filing spouse Employed Not employed teacher |

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 0.00 6,234.91 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 3. 0.00 +\$ 0.00 6,234.91 Calculate gross Income. Add line 2 + line 3. 0.00

Official Form 106I Schedule I: Your Income page 1

| Debt Debt | | Jeffery L Hughes Dessie J Hughes | - | Cas | e number (<i>if kr</i> | nown) | | | | |
|--------------|---------------|---|------------|----------|-------------------------|----------|----------|-----------------------------|-------------------|--------------|
| | | | | | or Debtor 1 | | | or Debtor 2 on-filing sp | ouse | |
| | Сор | y line 4 here | 4. | \$_ | (| 0.00 | \$_ | 6,2 | 234.91 | |
| 5. | List | all payroll deductions: | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$ | (| 0.00 | \$ | 1,2 | 206.03 | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | | (| 0.00 | \$ | | 0.00 | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | | | 0.00 | \$_ | 1 | 87.05 | |
| | 5d. | Required repayments of retirement fund loans | 5d. | | | 0.00 | \$_ | | 0.00 | |
| | 5e. 5f. | Insurance | 5e. 5f. | \$ \$ | | 0.00 | \$ _ | | 27.40 | |
| | 5g. | Domestic support obligations Union dues | 5g. | | | 0.00 | φ_ \$ | | 0.00 | |
| | 5h. | Other deductions. Specify: Health Savings Account | 5h. | | | 0.00 | | | 281.67 | |
| 6. | | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | - 6. | \$ | | 0.00 | \$ | | 302.15 | |
| 7. | | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | | 0.00 | \$ | | 132.76 | |
| | | | ٠. | Ψ_ | • | <i>.</i> | Ψ_ | ,- | +32.70 | |
| 8. | 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | | | | |
| | | monthly net income. | 8a. | | | 0.00 | \$_ | | 0.00 | |
| | 8b. | Interest and dividends | 8b. | \$_ | (| 0.00 | \$_ | | 0.00 | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive | | | | | | | | |
| | | Include alimony, spousal support, child support, maintenance, divorce | 0.0 | ¢ | , | | ¢ | | 0.00 | |
| | 8d. | settlement, and property settlement. Unemployment compensation | 8c. 8d. | | | 0.00 | \$ _ | | 0.00 | |
| | 8e. | Social Security | 8e. | : - | | 0.00 | Ψ_ \$ | | 0.00 | |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f. | \$_ | (| 0.00 | \$_ | | 0.00 | |
| | 8g. | Pension or retirement income | 8g. | _ | | 0.00 | \$_ | | 0.00 | |
| | 8h. | Other monthly income. Specify: | _ 8h. | + \$_ | (| 0.00 | + \$_ | | 0.00 | |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$_ | (| 0.00 | \$_ | | 0.00 | |
| 10. | | culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | \$ | 0.00 | + \$ | 4 | ,432.76 | = \$ | 4,432.76 |
| 11. | Inclu othe | e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify: | deper | | | | · | | | 0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies | | | | | | 12. | <u> </u> | 4,432.76 |
| 13. | Do y | you expect an increase or decrease within the year after you file this form | ? | | | | | | Combin monthly | ed income |
| | | No. | | | | | | | | |
| | | Yes. Explain: | | | | | | | | |

| Fill | in this informa | ation to identify yo | our case: | | | | | |
|------------|--|--|----------------|--|--|----------------------------|---|--|
| Deb | otor 1 | Jeffery L Hu | ghes | | | Che | eck if this is: | |
| | ebtor 2 Dessie J Hughes Spouse, if filing) | | | | | | | wing postpetition chapter the following date: |
| Unit | ed States Bank | cruptcy Court for the | : WESTE | ERN DISTRICT OF MICHIC | BAN | | MM / DD / YYYY | |
| | | , | | | | | , , | |
| 1 | e number nown) | | | | | | | |
| | | orm 106J | _ | | | | | |
| | | J: Your | | | a filim m ta math am h | -41 | | 12/15 |
| info | ormation. If n | | eded, atta | . If two married people ar ich another sheet to this i n. | | | | |
| Par | | ribe Your House | hold | | | | | |
| 1. | Is this a joi ☐ No. Go t | | | | | | | |
| | _ | o iiile 2. es Debtor 2 live i | in a separ | ate household? | | | | |
| | _ 100. D N | | a copa. | | | | | |
| | | | st file Offici | al Form 106J-2, <i>Expenses</i> | for Separate House | ehold of De | btor 2. | |
| 2. | Do you hav | ve dependents? | ■ No | | | | | |
| | Do not list Debtor 2. | Debtor 1 and | ☐ Yes. | Fill out this information for each dependent | Dependent's relati Debtor 1 or Debto | | Dependent's age | Does dependent live with you? |
| | Do not state | | | | | | | □ No |
| | dependents | s names. | | | | | | ☐ Yes ☐ No |
| | | | | | | | | ☐ Yes |
| | | | | | | | | □ No |
| | | | | | | | _ | ☐ Yes |
| | | | | | | | | □ No □ Yes |
| 3. | | penses include | _ | No | | | | — 100 |
| | | of people other t nd your depende | | Yes | | | | |
| Est exp | imate your e | a date after the l | our bankr | ly Expenses uptcy filing date unless y y is filed. If this is a supp | ou are using this followed the lemental Schedule | orm as a s e J, check t | supplement in a Cha the box at the top o | apter 13 case to report of the form and fill in the |
| the | | ch assistance an | | government assistance it cluded it on <i>Schedule I:</i> Y | | | Your exp | enses |
| • | - 1 | | 1. 1 | | | | | |
| 4. | | or home owners and any rent for th | | ses for your residence. In or lot. | nclude first mortgage | e 4. | \$ | 1,000.00 |
| | If not inclu | ded in line 4: | | | | | | |
| | 4a. Real | estate taxes | | | | 4a. | \$ | 333.00 |
| | | erty, homeowner's | | | | 4b. | · ——— | 102.00 |
| | | e maintenance, re eowner's associat | | | | 4c. 4d. | · | 0.00 |
| 5. | | | | our residence, such as ho | me equity loans | 5. | • | 500.00 |

| Deb | btor 1 Jeffery L Hughes | | | |
|-----|---|------------------------|------------------|------------------------------|
| Deb | btor 2 Dessie J Hughes | Case num | ber (if known) | |
| 6 | Hallisian | | | |
| 6. | Utilities: 6a. Electricity, heat, natural gas | 6a. | \$ | 200.00 |
| | 6b. Water, sewer, garbage collection | 6b. | · | 12.00 |
| | 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ | 110.00 |
| | 6d. Other. Specify: | 6d. | • | 0.00 |
| 7. | Food and housekeeping supplies | 7. | · | 300.00 |
| 8. | Childcare and children's education costs | 8. | \$ | 0.00 |
| 9. | Clothing, laundry, and dry cleaning | _ | \$ | 0.00 |
| - | Personal care products and services | 10. | * | 0.00 |
| 11. | • | 11. | * | 0.00 |
| 12. | Transportation. Include gas, maintenance, bus or train fare. | | · - | |
| | Do not include car payments. | 12. | \$ | 100.00 |
| 13. | Entertainment, clubs, recreation, newspapers, magazines, and book | s 13. | \$ | 0.00 |
| 14. | Charitable contributions and religious donations | 14. | \$ | 0.00 |
| 15. | Insurance. | | | |
| | Do not include insurance deducted from your pay or included in lines 4 or | | Φ. | 202.00 |
| | 15a. Life insurance | 15a. | · | 200.00 |
| | 15b. Health insurance | 15b. | · | 0.00 |
| | 15c. Vehicle insurance | 15c. | \$ | 200.00 |
| 16 | 15d. Other insurance. Specify: | 15d. | a | 0.00 |
| | Taxes. Do not include taxes deducted from your pay or included in lines 4 Specify: | or 20. 16. | \$ | 0.00 |
| 17. | Installment or lease payments: | | • | |
| | 17a. Car payments for Vehicle 1 | 17a. | | 395.00 |
| | 17b. Car payments for Vehicle 2 | 17b. | · | 0.00 |
| | 17c. Other. Specify: | 17c. | | 0.00 |
| 4.0 | 17d. Other. Specify: | 17d. | \$ | 0.00 |
| | Your payments of alimony, maintenance, and support that you did n deducted from your pay on line 5, Schedule I, Your Income (Official I | Form 106I). 18. | | 0.00 |
| 19. | Other payments you make to support others who do not live with yo | | \$ | 0.00 |
| | Specify: | 19. | | |
| 20. | Other real property expenses not included in lines 4 or 5 of this form | | | 0.00 |
| | 20a. Mortgages on other property | 20a. | | 0.00 |
| | 20b. Real estate taxes | 20b. | | 0.00 |
| | 20c. Property, homeowner's, or renter's insurance | 20c. | · | 0.00 |
| | 20d. Maintenance, repair, and upkeep expenses | 20d. | • | 0.00 |
| 0.4 | 20e. Homeowner's association or condominium dues | 20e. | · | 0.00 |
| 21. | Other: Specify: lease monthly pymt for apartment | 21. | +\$ | 1,275.00 |
| 22. | Calculate your monthly expenses | | | |
| | 22a. Add lines 4 through 21. | | \$ | 4,727.00 |
| | 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Fo | orm 106J-2 | \$ | |
| | 22c. Add line 22a and 22b. The result is your monthly expenses. | | \$ | 4,727.00 |
| 23. | Calculate your monthly net income. | | | |
| | 23a. Copy line 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 4,432.76 |
| | 23b. Copy your monthly expenses from line 22c above. | 23b. | -\$ | 4,727.00 |
| | | | | · |
| | 23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> . | 23c. | \$ | -294.24 |
| _ | , , | | | |
| 24. | Do you expect an increase or decrease in your expenses within the | | | aso or docrease because of a |
| | For example, do you expect to finish paying for your car loan within the year or do your modification to the terms of your mortgage? | ou expect your mongage | payment to incre | ase of decrease because of a |
| | No. | | | |
| | Yes. Explain here: | | | |
| | LAPIGITITIES. | | | |

| Fill in this info | rmation to identify your c | ase: | | | |
|-----------------------------------|--|------------------------|------------------------------|--------------------------|---|
| Debtor 1 | Jeffery L Hughes | Middle Name | Last Name | | |
| Debtor 2 | Dessie J Hughes | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States B | Sankruptcy Court for the: | WESTERN DISTRICT | Γ OF MICHIGAN | | |
| Case number (if known) | | | | | ☐ Check if this is an amended filing |
| Official For Declara | - | n Individua | al Debtor's So | hedules | 12/15 |
| obtaining mone years, or both. | | connection with a ba | | | ement, concealing property, or 00, or imprisonment for up to 20 |
| Did you p | ay or agree to pay somed | ne who is NOT an att | orney to help you fill out b | pankruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. | Name of person | | | | kruptcy Petition Preparer's Notice, a, and Signature (Official Form 119) |
| | alty of perjury, I declare t re true and correct. | hat I have read the su | mmary and schedules file | ed with this declaration | on and |
| X /s/ Jef | ffery L Hughes | | X /s/ Dessie | J Hughes | |
| Jeffer | ry L Hughes ure of Debtor 1 | | Dessie J H Signature of | lughes | |
| Date | June 29, 2018 | | Date <u>Jun</u> | e 29, 2018 | |

| | nation to identify you | | | | |
|---------------------|---|---|---|---|---|
| Debtor 1 | Jeffery L Hughe First Name | S Middle Name | Last Name | | |
| Debtor 2 | Dessie J Hughes | 5 | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | nkruptcy Court for the: | WESTERN DISTRICT OF | MICHIGAN | | |
| Case number | | | | | |
| (if known) | | | | | Check if this is an |
| | | | | | amended filing |
| Official Fo | mm 107 | | | | |
| Official Fo | | Affaira far Iralissia | luala Filina fan B |) a m lem , m t a , , | |
| | | Affairs for Indivic | | | 4/16 |
| | | | | equally responsible for sup y additional pages, write you | |
| | n). Answer every que | | | , p. g, , . | |
| Part 1: Give I | Details About Your Ma | rital Status and Where You | Lived Before | | |
| 1. What is you | r current marital statu | ıs? | | | |
| _ | | | | | |
| ■ Married □ Not ma | | | | | |
| ☐ Not ma | mea | | | | |
| 2. During the I | ast 3 years, have you | lived anywhere other than v | where you live now? | | |
| □ No | | | | | |
| Yes. Lis | st all of the places you l | ived in the last 3 years. Do no | ot include where you live now | V. | |
| Debtor 1 Pr | rior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ac | ldress: | Dates Debtor 2 lived there |
| 7558 Penr | | From-To: 2012 - 2015 | Same as Debtor | 1 | Same as Debtor 1 |
| Traverse | City, MI 49686 | 2012 - 2015 | | | From-To: |
| states and territor | <i>ie</i> s include Arizona, Ca | | vada, New Mexico, Puerto R | nity property state or territor ico, Texas, Washington and V | |
| Part 2 Explai | in the Sources of You | r Income | | | |
| Fill in the tota | al amount of income yo | nployment or from operating u received from all jobs and a have income that you receive | all businesses, including part | | ndar years? |
| □ No | | | | | |
| ■ Yes. Fil | I in the details. | | | | |
| | | Debtor 1 | | Debtor 2 | |
| | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | of current year untiled for bankruptcy: | ☐ Wages, commissions, bonuses, tips | \$8,103.00 | ■ Wages, commissions, bonuses, tips | \$36,046.37 |
| | | Operating a business | | ☐ Operating a business | |
| Official Form 107 | | Statement of Financial Affa | airs for Individuals Filing for B | ankruptcy | page ' |

page 1

Case:18-02908-swd Doc #:1 Filed: 06/29/2018 Page 48 of 77

| | Debtor 2 Dessie J Hughes Debtor 2 Dessie J Hughes | | | | Case number (if known) | | | | |
|------|--|---|--|---|--|---|--|--|--|
| | | | Debtor 1 | Debter 2 | | | | | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | | | |
| | last calen nuary 1 to | dar year: December 31, 2017) | ■ Wages, commissions, bonuses, tips | \$822.00 | ■ Wages, commissions bonuses, tips | \$69, 731.00 | | | |
| | | | Operating a business | | ☐ Operating a business | | | | |
| | | dar year before that: December 31, 2016) | ■ Wages, commissions, bonuses, tips | \$21,946.00 | ■ Wages, commissions bonuses, tips | \$66,894.00 | | | |
| | | | ☐ Operating a business | | ☐ Operating a business | | | | |
| | | | ☐ Wages, commissions, bonuses, tips | \$7,146.00 | ■ Wages, commissions bonuses, tips | , \$12,157.85 | | | |
| | | | Operating a business | | ☐ Operating a business | | | | |
| | □ No ■ Yes. | Fill in the details. | Debtor 1 Sources of income Describe below. | Gross income from each source | Debtor 2 Sources of income Describe below. | Gross income (before deductions | | | |
| | | | | (before deductions and exclusions) | | and exclusions) | | | |
| | | dar year before that: December 31, 2016) | | \$0.00 | | | | | |
| Part | Are either □ No. | Debtor 1's or Debtor Neither Debtor 1 nor individual primarily for During the 90 days ber No. Go to line Yes List below paid that conot include * Subject to adjustme Debtor 1 or Debtor 2 During the 90 days ber No. Go to line Yes List below include pain | each creditor to whom you pai creditor. Do not include paymer e payments to an attorney for the nt on 4/01/19 and every 3 year or both have primarily consu fore you filed for bankruptcy, di | r debts? umer debts. Consumer debt Id purpose." id you pay any creditor a tota id a total of \$6,425* or more ints for domestic support oblig his bankruptcy case. Its after that for cases filed on umer debts. Id you pay any creditor a total id a total of \$600 or more and | il of \$6,425* or more? in one or more payments argations, such as child support or after the date of adjustm il of \$600 or more? d the total amount you paid | nd the total amount you out and alimony. Also, do sent. | | | |
| | Creditor' | s Name and Address | Dates of payme | ent Total amount | Amount you Was th | is payment for | | | |
| | | | | paid | still owe | | | | |

Debtor 1 **Jeffery L Hughes**Debtor 2 **Dessie J Hughes**

Case number (if known)

| Creditor's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Was this payment for |
|--|---|-------------------|----------------------|---|
| Lending Club 71 Stevenson St ste 300 San Francisco, CA 94105 | Jan - March unsecured lender | \$3,600.00 | \$22,600.00 | ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other unsecured debt |
| VDL Certified Public Accountants 1240 E 8th St Traverse City, MI 49686 | Jan - March, 2018 accountant | \$600.00 | \$3,144.00 | ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other |
| Rosemarie Farthing 512Terrace Rd Traverse City, MI 49686 | Jan - March, 2018 land contract | \$3,000.00 | \$192,000.00 | ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other |
| Lemay Enterprises, LLC 501 Sixth St. Traverse City, MI 49684 | Jan-March, 2018 2nd mortgage | \$1,500.00 | \$38,000.00 | ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other |
| Art Hughes | Jan -March, 2018 lien holder on real estate | \$4,041.00 | \$4,500.00 | ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other |
| subaru | Jan - March, 2018 | \$1,140.00 | \$0.00 | ☐ Mortgage ■ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other |
| American Express PO Box 981535 El Paso, TX 79998 | Jan - March, 2017 credit card | \$2,000.00 | \$800.00 | ☐ Mortgage ☐ Car ■ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other |

Case:18-02908-swd Doc #:1 Filed: 06/29/2018 Page 50 of 77

| 0 1% | D | - | | |
|--|--|--|---|---|
| Creditor's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Was this payment for |
| PNC Bank PO Box 1820 Dayton, OH 45401 | Jan - March, 2018 credit card | \$600.00 | \$0.00 | ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment |
| | | | | ☐ Suppliers or vendors ☐ Other |
| American Express PO Box 981535 | jan - March, 2018 credit card | \$600.00 | \$0.00 | ☐ Mortgage ☐ Car |
| El Paso, TX 79998 | | | | Credit Card |
| | | | | Loan Repayment |
| | | | | ☐ Suppliers or vendors ☐ Other |
| alimony. ■ No □ Yes. List all payments to an insider. | | | | |
| Insider's Name and Address | Dates of payment | Total amount | Amount you | Reason for this payment |
| Within 1 year before you filed for bankru | ptcy, did you make any pay | paid | still owe | |
| insider? Include payments on debts guaranteed or c No | | paid | still owe | |
| insider? Include payments on debts guaranteed or c | | paid yments or transfer a Total amount | still owe any property on a | ccount of a debt that benefite |
| insider? Include payments on debts guaranteed or c ■ No □ Yes. List all payments to an insider Insider's Name and Address | Dates of payment | paid yments or transfer a | still owe | ccount of a debt that benefite |
| insider? Include payments on debts guaranteed or c ■ No □ Yes. List all payments to an insider | Dates of payment ions, and Foreclosures ptcy, were you a party in a | paid yments or transfer a Total amount paid ny lawsuit, court ac | still owe my property on a Amount you still owe | Reason for this payment Include creditor's name |
| insider? Include payments on debts guaranteed or complete No Yes. List all payments to an insider Insider's Name and Address Identify Legal Actions, Repossessivithin 1 year before you filed for bankru List all such matters, including personal injuried. | Dates of payment ions, and Foreclosures ptcy, were you a party in a | paid yments or transfer a Total amount paid ny lawsuit, court ac | still owe my property on a Amount you still owe | Reason for this payment Include creditor's name |
| insider? Include payments on debts guaranteed or complete No Yes. List all payments to an insider Insider's Name and Address Identify Legal Actions, Repossessivithin 1 year before you filed for bankru List all such matters, including personal injurated in the production of the p | Dates of payment ions, and Foreclosures ptcy, were you a party in a | paid yments or transfer a Total amount paid ny lawsuit, court ac | still owe my property on a Amount you still owe | Reason for this payment Include creditor's name |
| insider? Include payments on debts guaranteed or complete No Yes. List all payments to an insider Insider's Name and Address Identify Legal Actions, Repossessing Within 1 year before you filed for bankru List all such matters, including personal injumodifications, and contract disputes. | Dates of payment ions, and Foreclosures ptcy, were you a party in a | paid yments or transfer a Total amount paid ny lawsuit, court ac | still owe my property on a Amount you still owe | Reason for this payment Include creditor's name |
| insider? Include payments on debts guaranteed or correct No No Yes. List all payments to an insider Insider's Name and Address 4: Identify Legal Actions, Repossessi Within 1 year before you filed for bankru List all such matters, including personal injumodifications, and contract disputes. No Yes. Fill in the details. Case title | Dates of payment ions, and Foreclosures ptcy, were you a party in a iry cases, small claims action | paid yments or transfer a Total amount paid ny lawsuit, court ac ns, divorces, collectio Court or agency 86th District Ct 280 Washingto Ste 114C | Amount you still owe tion, or administr n suits, paternity and n St. | Reason for this payment Include creditor's name |
| insider? Include payments on debts guaranteed or corollar No ☐ Yes. List all payments to an insider Insider's Name and Address 4: Identify Legal Actions, Repossessi Within 1 year before you filed for bankru List all such matters, including personal injumodifications, and contract disputes. ☐ No ☐ Yes. Fill in the details. Case title Case number cavalry SPV LLc vs Jeff Hughes | Dates of payment ions, and Foreclosures ptcy, were you a party in a lary cases, small claims action Nature of the case summons & | paid yments or transfer a Total amount paid ny lawsuit, court ac ns, divorces, collectio Court or agency 86th District Ct 280 Washingto | Amount you still owe tion, or administr n suits, paternity and n St. | Reason for this payment Include creditor's name rative proceeding? actions, support or custody Status of the case Pending On appeal |
| insider? Include payments on debts guaranteed or corollar No ☐ Yes. List all payments to an insider Insider's Name and Address 4: Identify Legal Actions, Repossessi Within 1 year before you filed for bankru List all such matters, including personal injumodifications, and contract disputes. ☐ No ☐ Yes. Fill in the details. Case title Case number cavalry SPV LLc vs Jeff Hughes | Dates of payment ions, and Foreclosures ptcy, were you a party in a lary cases, small claims action Nature of the case summons & | paid yments or transfer a Total amount paid ny lawsuit, court ac ns, divorces, collectio Court or agency 86th District Ct 280 Washingto Ste 114C | Amount you still owe tion, or administrest suits, paternity as a suits. | Reason for this payment Include creditor's name rative proceeding? actions, support or custody Status of the case Pending On appeal Concluded judgment |
| insider? Include payments on debts guaranteed or color local loca | Dates of payment ions, and Foreclosures ptcy, were you a party in a rry cases, small claims action Nature of the case summons & complaint | paid yments or transfer a Total amount paid ny lawsuit, court ac ns, divorces, collection Court or agency 86th District Ct 280 Washingto Ste 114C Traverse City, | Amount you still owe tion, or administrations, paternity as in St. | Reason for this payment Include creditor's name rative proceeding? ctions, support or custody Status of the case Pending On appeal Concluded |

Debtor 1 Jeffery L Hughes

Case:18-02908-swd Doc #:1 Filed: 06/29/2018 Page 51 of 77

| | otor 1 Jeffery L Hughes Otor 2 Dessie J Hughes | | Case number (| if known) | |
|-----|---|---------------------------|--|-----------------------------|--------------------------------|
| | Case title Case number | Nature of the case | Court or agency | Status of th | e case |
| | Jeffrey L. Hughes vs Brownwood Investors, LLC, Carol H. Vittert, B-Wood Farms, LLC, Mark B. | summons & complaint | 13th Judicial Circuit Ct. 328 Washington St. Traverse City, MI 49684 | ☐ Pending☐ On appe | eal |
| | Vittert, Leland H. Vittert and John Doe 2016-031779 CB | | Traverse City, Wil 49004 | ■ Conclud | ed |
| | Howard A Hughes and Helen K. Hughes vs Jeff L . Hughes and Dessie J. Hughes 2016-31894 | Summons & Complaint | 13th Judicial Circuit Ct. 328 Washington St. Traverse City, MI 49684 | ☐ Pending☐ On appe☐ Conclud | eal |
| 10. | Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. | | | | |
| | Creditor Name and Address | | | | Value of the |
| | | Explain what happen | ed | | property |
| 11. | Within 90 days before you filed for bankru accounts or refuse to make a payment bed No Yes. Fill in the details. Creditor Name and Address | | | Date action was | Amounts |
| | | | | taken | |
| 12. | Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or a No | | perty in the possession of an a | ssignee for the bene | efit of creditors, a |
| | Yes | | | | |
| Pa | t 5: List Certain Gifts and Contributions | | | | |
| 13. | Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift. | ptcy, did you give any gi | its with a total value of more th | an \$600 per person' | ? |
| | Gifts with a total value of more than \$600 per person | Describe the gift | s | Dates you gave the gifts | Value |
| | Person to Whom You Gave the Gift and Address: | | | | |
| | | | | | |
| 14. | ■ No | | its or contributions with a total | value of more than | \$600 to any charity? |
| 14. | _ | ntribution. | | value of more than | \$600 to any charity? Value |

Case:18-02908-swd Doc #:1 Filed: 06/29/2018 Page 52 of 77

| | btor 1 btor 2 | Jeffery L Hughes Dessie J Hughes | | | Ca | ise number (i | f known) | |
|-----|---------------------|---|-------------------|--|--------|---------------|---|---------------------------|
| Par | rt 6: | List Certain Losses | | | | | | |
| 15. | | n 1 year before you filed for bankrup mbling? | otcy or | since you filed for bankruptcy, di | id yo | u lose anyth | ning because of the | t, fire, other disaster, |
| | | No Yes. Fill in the details. | | | | | | |
| | | the loss occurred | Include | be any insurance coverage for the the amount that insurance has paid the claims on line 33 of Schedule A | d. Lis | t pending | Date of your loss | Value of property lost |
| Par | rt 7: | List Certain Payments or Transfers | i | | | | | |
| 16. | consi | n 1 year before you filed for bankrup ulted about seeking bankruptcy or p de any attorneys, bankruptcy petition pr | reparir | ng a bankruptcy petition? | | | | rty to anyone you |
| | _ | No Yes. Fill in the details. | | | | | | |
| | Pers Addi Ema | on Who Was Paid | OU | Description and value of any pr transferred | roper | rty | Date payment or transfer was made | Amount of payment |
| | Mor 444 Alpe | timer Law Firm, PLC W. Baldwin Street ena, MI 49707 @rdmortimerlaw.com | ou . | | | | | \$2,700.00 |
| 17. | prom | n 1 year before you filed for bankrup ised to help you deal with your cred ot include any payment or transfer that | litors o | r to make payments to your credi | | | r transfer any prope | rty to anyone who |
| | _ | No Yes. Fill in the details. | | | | | | |
| | | on Who Was Paid | | Description and value of any pr transferred | roper | rty | Date payment or transfer was made | Amount of payment |
| | | ding Club Stevenson St 300 | | cash - monthly payments ov year | ver ti | he past | | \$14,160.00 |
| | | Francisco, CA 94105 | | | | | | |
| 18. | Includinclud | n 2 years before you filed for bankru ferred in the ordinary course of you de both outright transfers and transfers de gifts and transfers that you have alre No Yes. Fill in the details. | r busin made a | ess or financial affairs? as security (such as the granting of | | | | |
| | Addı | | | Description and value of property transferred | | | ny property or received or debts change | Date transfer was made |
| | Mari | con's relationship to you k Vittert pehalf of B-Wood Farms, LLC | | 2014 GMC Sierra Truck - \$38,000.00 | | City State | with Traverse Bank. vehicle in debtor's it paid for as a asset. | 7/2016 |

Case:18-02908-swd Doc #:1 Filed: 06/29/2018 Page 53 of 77

| | btor 1 Jeffery L Hughes btor 2 Dessie J Hughes | | | Case nur | mber (if known) | | |
|-----|--|---|---|---------------|--|---|--|
| 19. | Within 10 years before you filed for banks beneficiary? (These are often called asset- No Yes. Fill in the details. | | any property to a | a self-settle | ed trust or similar device | e of which you are a | |
| | Name of trust | Description and | I value of the pro | operty tran | sferred | Date Transfer was | |
| | Robert Chamberlain | | | | | made | |
| | | | | | | | |
| Par | tt 8: List of Certain Financial Accounts, | Instruments, Safe Depos | sit Boxes, and S | torage Uni | its | | |
| 20. | Within 1 year before you filed for bankrup sold, moved, or transferred? Include checking, savings, money marker houses, pension funds, cooperatives, assume No | t, or other financial acco | unts; certificate | s of depos | | | |
| | Yes. Fill in the details. | | | | | | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | | | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer | |
| | PNC Bank One Ncc Parkway Mail Code Z1-YB43-02-1 Kalamazoo, MI 49009 | XXXX-9943 | ■ Checking □ Savings □ Money Market □ Brokerage □ Other | | 4/2018 | \$5,000.00 | |
| | Traverse City State Bank 310 W. Front St. PO Box 1047 Traverse City, MI 49685 | xxxx-9746 | ■ Checking □ Savings □ Money Ma □ Brokerage □ Other | | 6/12/18 | \$8.00 | |
| 21. | Do you now have, or did you have within cash, or other valuables? No Yes. Fill in the details. | 1 year before you filed f | or bankruptcy, a | any safe de | eposit box or other depo | sitory for securities, | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had at Address (Number State and ZIP Code) | | Describe | e the contents | Do you still have it? | |
| | TBA Credit Union PO Box 1003 Traverse City, MI 49685 | Jeff Hughes & Hughes | Dessie | | children's savings itle to Jeep, birth ates | □ No ■ Yes | |
| 22. | _ | it or place other than yo | ur home within | 1 year befo | ore you filed for bankrup | tcy? | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has on to it? Address (Number State and ZIP Code) | | Describe | e the contents | Do you still have it? | |

Case:18-02908-swd Doc #:1 Filed: 06/29/2018 Page 54 of 77

| | otor 1 Jeffery L Hughes tor 2 Dessie J Hughes | | Case number (if known) | |
|-----|---|---|--|-----------------------|
| Par | t 9: Identify Property You Hold or Control for | Someone Else | | |
| 23. | Do you hold or control any property that someofor someone. | one else owns? Include any prope | rty you borrowed from, are storing for | r, or hold in trust |
| | ■ No □ Yes. Fill in the details. | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the property? (Number, Street, City, State and ZIP Code) | Describe the property | Value |
| Par | t 10: Give Details About Environmental Inform | ation | | |
| For | the purpose of Part 10, the following definitions | apply: | | |
| • | Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su | ıir, land, soil, surface water, groun bstances, wastes, or material. | dwater, or other medium, including st | atutes or |
| | Site means any location, facility, or property as to own, operate, or utilize it, including disposal | - | law, whether you now own, operate, | or utilize it or used |
| | Hazardous material means anything an environ hazardous material, pollutant, contaminant, or | | s waste, hazardous substance, toxic s | substance, |
| Rep | ort all notices, releases, and proceedings that ye | ou know about, regardless of whe | n they occurred. | |
| 24. | Has any governmental unit notified you that yo | u may be liable or potentially liabl | e under or in violation of an environm | ental law? |
| | ■ No | | | |
| | Yes. Fill in the details. | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State at ZIP Code) | Environmental law, if you know it | Date of notice |
| 25. | Have you notified any governmental unit of any | release of hazardous material? | | |
| | ■ No □ Yes. Fill in the details. | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State an ZIP Code) | Environmental law, if you know it | Date of notice |
| 26. | Have you been a party in any judicial or admini | strative proceeding under any env | vironmental law? Include settlements | and orders. |
| | ■ No | | | |
| | Yes. Fill in the details. | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | Status of the case |
| Par | t 11: Give Details About Your Business or Con | nnections to Any Business | | |
| 27. | Within 4 years before you filed for bankruptcy, | did you own a business or have a | ny of the following connections to any | y business? |
| | ☐ A sole proprietor or self-employed in a | trade, profession, or other activity | , either full-time or part-time | |
| | ■ A member of a limited liability company | (LLC) or limited liability partners | hip (LLP) | |
| | ☐ A partner in a partnership | | | |
| | ☐ An officer, director, or managing execu | tive of a corporation | | |
| | ☐ An owner of at least 5% of the voting or | equity securities of a corporation | 1 | |

Case:18-02908-swd Doc #:1 Filed: 06/29/2018 Page 55 of 77

| | tor 1 Jeffery L Hughes tor 2 Dessie J Hughes | Ca | ise number (i | f known) |
|-----------------------|---|---|---------------|---|
| | ■ No. None of the above applies. Go to | Part 12 | | |
| | | | | |
| Business Name | | Describe the nature of the business | | Identification number |
| | Address (Number, Street, City, State and ZIP Code) | Name of accountant or bookkeeper | | siness existed |
| | B-Wood, LLC PO BOX 1284 | food | EIN: | 30-0088205 |
| | Traverse City, MI 49685 | Brad Niergarth | From-To | 6/2002 - 7/2017 |
| | JLHughes & Ass. 516 S Union St | consulting | EIN: | xxx-xx-3760 |
| | Traverse City, MI 49684 | Jeff Hughes | From-To | 9/2016 to current |
| | Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code) | Date Issued | | |
| Par | 112: Sign Below | | | |
| are t with 18 U | rue and correct. I understand that making a bankruptcy case can result in fines up to .S.C. §§ 152, 1341, 1519, and 3571. | inancial Affairs and any attachments, and I of a false statement, concealing property, or of a \$250,000, or imprisonment for up to 20 years. | btaining mo | oney or property by fraud in connection |
| | Jeffery L Hughes fery L Hughes | /s/ Dessie J Hughes Dessie J Hughes | | |
| | nature of Debtor 1 | Signature of Debtor 2 | | |
| Dat | June 29, 2018 | DateJune 29, 2018 | | |
| Did y ■ N □ Y | 0 | nent of Financial Affairs for Individuals Filin | g for Bankrı | uptcy (Official Form 107)? |
| Did y ■ N | | ot an attorney to help you fill out bankrupto | y forms? | |
| ПΥ | es. Name of Person Attach the Bankr | uptcy Petition Preparer's Notice, Declaration, a | and Signature | e (Official Form 119). |

| Fill in this information to identify your case: | | |
|--|---|---|
| Debtor 1 Jeffery L Hughes | | |
| First Name Middle Nam | ne Last Name | |
| Debtor 2 Dessie J Hughes (Spouse if, filing) First Name Middle Nan | ne Last Name | |
| | | |
| United States Bankruptcy Court for the: WESTERN D | ISTRICT OF MICHIGAN | |
| Case number(if known) | | ☐ Check if this is an amended filing |
| | | aoraoag |
| Official Form 108 | | |
| Statement of Intention for Inc | dividuals Filing Under Chapter | r 7 12/15 |
| | arriadale i milg Gilder Gilapie. | 12/10 |
| you are an individual filing under chapter 7, you mus | st fill out this form if: | |
| creditors have claims secured by your property, or | | |
| you have leased personal property and the lease ha | | |
| | Ifter you file your bankruptcy petition or by the date set is the time for cause. You must also send copies to the | |
| two married people are filing together in a joint case sign and date the form. | e, both are equally responsible for supplying correct info | ormation. Both debtors must |
| to as complete and accurate as nessible. If more sna | ce is needed, attach a separate sheet to this form. On th | ne ton of any additional names |
| write your name and case number (if known) | | ie top of any additional pages, |
| | | |
| Part 1: List Your Creditors Who Have Secured Clair | ms | |
| • | le D: Creditors Who Have Claims Secured by Property (| Official Form 106D), fill in the |
| information below. Identify the creditor and the property that is collateral | What do you intend to do with the property that | D' 11-' 11 |
| | secures a debt? | Did you claim the property |
| | 500di 50 d dobi i | Did you claim the property as exempt on Schedule C? |
| | 3334.05 4 4321. | |
| Creditor's Chase Auto Finace | _ | |
| Creditor's Chase Auto Finace name: | ☐ Surrender the property. ☐ Retain the property and redeem it. | as exempt on Schedule C? |
| | ☐ Surrender the property. ☐ Retain the property and redeem it. ■ Retain the property and enter into a | as exempt on Schedule C? |
| name: Description of property Description of property Description of property 2016 Subaru Crosstrek 13000 miles | ☐ Surrender the property. ☐ Retain the property and redeem it. | as exempt on Schedule C? ☐ No |
| name: Description of 2016 Subaru Crosstrek 13000 | ☐ Surrender the property. ☐ Retain the property and redeem it. ■ Retain the property and enter into a Reaffirmation Agreement. | as exempt on Schedule C? □ No |
| name: Description of property Description of property Description of property 2016 Subaru Crosstrek 13000 miles | ☐ Surrender the property. ☐ Retain the property and redeem it. ■ Retain the property and enter into a Reaffirmation Agreement. | as exempt on Schedule C? ☐ No |
| name: Description of property securing debt: 2016 Subaru Crosstrek 13000 miles leased vehicle | ☐ Surrender the property. ☐ Retain the property and redeem it. ■ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]: | as exempt on Schedule C? □ No ■ Yes |
| name: Description of property securing debt: 2016 Subaru Crosstrek 13000 miles leased vehicle | ☐ Surrender the property. ☐ Retain the property and redeem it. ■ Retain the property and enter into a Reaffirmation Agreement. | as exempt on Schedule C? □ No |
| name: Description of property securing debt: Creditor's Lemay Enterprises, LLC name: | □ Surrender the property. □ Retain the property and redeem it. ■ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: □ Surrender the property. □ Retain the property and redeem it. ■ Retain the property and enter into a | as exempt on Schedule C? □ No ■ Yes |
| Description of property securing debt: Creditor's Lemay Enterprises, LLC name: Description of 516 S Union St Traverse City, Management of the substitution of the su | □ Surrender the property. □ Retain the property and redeem it. ■ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: □ Surrender the property. □ Retain the property and redeem it. ■ Retain the property and enter into a Reaffirmation Agreement. | as exempt on Schedule C? ☐ No ■ Yes ☐ No |
| name: Description of property securing debt: Creditor's Lemay Enterprises, LLC name: | □ Surrender the property. □ Retain the property and redeem it. ■ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: □ Surrender the property. □ Retain the property and redeem it. ■ Retain the property and enter into a | as exempt on Schedule C? □ No ■ Yes □ No |
| name: Description of property securing debt: | □ Surrender the property. □ Retain the property and redeem it. ■ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: □ Surrender the property. □ Retain the property and redeem it. ■ Retain the property and enter into a Reaffirmation Agreement. | as exempt on Schedule C? □ No ■ Yes □ No |
| Description of property securing debt: Creditor's Lemay Enterprises, LLC name: Description of property securing debt: 516 S Union St Traverse City, M 49684 Grand Traverse County 3bdrm, 1 1/2 bath, 1350 sq ft., city lot SEV value | □ Surrender the property. □ Retain the property and redeem it. ■ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: □ Surrender the property. □ Retain the property and redeem it. ■ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: | as exempt on Schedule C? □ No ■ Yes □ No ■ Yes |
| name: Description of property securing debt: | □ Surrender the property. □ Retain the property and redeem it. ■ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: □ Surrender the property. □ Retain the property and redeem it. ■ Retain the property and enter into a Reaffirmation Agreement. | as exempt on Schedule C? □ No ■ Yes □ No |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Case:18-02908-swd Doc #:1 Filed: 06/29/2018 Page 57 of 77

| Debtor 1 Debtor 2 | Jeffery L Hughes Dessie J Hughes | | | Case n | umber (if known) | |
|--------------------------|--|--|-----------------|------------------------|--------------------|---|
| propert securin | | Traverse County path, 1350 sq ft., | ☐ Retain the pr | roperty and [explain]: | : | _ |
| Part 2: | List Your Unexpired Per | sonal Property Leases | | | | |
| n the info | rmation below. Do not li | | pired leases ar | e leases that are sti | ill in effect; the | d Leases (Official Form 106G), fill e lease period has not yet ended. e). |
| Describe | your unexpired persona | l property leases | | | | Will the lease be assumed? |
| Lessor's n Descriptio | name: on of leased | | | | | □ No |
| Property: | | | | | | ☐ Yes |
| Lessor's n | name: on of leased | | | | | □ No |
| Property: | | | | | | ☐ Yes |
| Lessor's n Descriptio | name: on of leased | | | | | □ No |
| Property: | 61.164664 | | | | | ☐ Yes |
| Lessor's n Descriptio | name: on of leased | | | | | □ No |
| Property: | | | | | | ☐ Yes |
| Lessor's n | name: on of leased | | | | | □ No |
| Property: | iii oi leaseu | | | | | ☐ Yes |
| Lessor's n | | | | | | □ No |
| Property: | n of leased | | | | | ☐ Yes |
| Lessor's n | | | | | | □ No |
| Description Property: | n of leased | | | | | ☐ Yes |
| Part 3: | Sign Below | | | | | |
| Inder per | nalty of perjury, I declare hat is subject to an unex | that I have indicated my in pired lease. | ntention about | any property of my | estate that sec | cures a debt and any personal |
| X /s/ J | effery L Hughes | | X / | /s/ Dessie J Hugh | es | |
| Jeff | ery L Hughes | | | Dessie J Hughes | | |
| Sign | ature of Debtor 1 | | ; | Signature of Debtor 2 | 2 | |
| Date | June 29, 2018 | | Date | June 29, 2018 | 3 | |

| Fill in t | his information to identify your case: | | | | only as d | lirected | in this form and | in Form |
|---------------------|---|--|--|---------------------------------|------------------------|------------------------|--------------------------------------|---------------------------------|
| Debtor | Jeffery L Hughes | | 122 | 2A-1Supp: | | | | |
| Debtor (Spouse, | | | [| ☐ 1. There is | s no pres | umptior | of abuse | |
| | States Bankruptcy Court for the: Western District o | f Michigan | ' | applies | will be r | nade un | mine if a presun | |
| | number | | | _ | ` | | m 122A-2). | |
| (if known |) | | | | | | ot apply now be e but it could ap | |
| | | | | ☐ Check if | this is a | ın ameı | nded filing | |
| Offic | cial Form 122A - 1 | | | | | | | |
| Cha | pter 7 Statement of Your Cur | rrent Mo | nthly Inc | ome | | | | 12/15 |
| attach a case nu | omplete and accurate as possible. If two married people a separate sheet to this form. Include the line number to with the married people in the separate sheet to this form. Include the line number to with the married sheet to the separate sheet to the separate sheet the sheet sheet the sheet | vhich the additio m a presumptior | nal information a | pplies. On the se you do not | e top of a have pri | ny additi marily co | ional pages, writ onsumer debts o | e your name and r because of |
| | /hat is your marital and filing status? Check one or | nly. | | | | | | |
| | Not married. Fill out Column A, lines 2-11. | | | | | | | |
| | Married and your spouse is filing with you. Fill or | ut both Columns | s A and B, lines | 2-11. | | | | |
| | Married and your spouse is NOT filing with you. | You and your | spouse are: | | | | | |
| | ☐ Living in the same household and are not lega | ally separated. | Fill out both Col | lumns A and | B, lines 2 | 2-11. | | |
| | ☐ Living separately or are legally separated. Fill penalty of perjury that you and your spouse are living apart for reasons that do not include evading | egally separate | d under nonban | kruptcy law t | hat appli | es or tha | | |
| 101(the 6 | n the average monthly income that you received from all 10A). For example, if you are filing on September 15, the 6-m of months, add the income for all 6 months and divide the total uses own the same rental property, put the income from that property is the income from that property. | nonth period would I by 6. Fill in the re | d be March 1 throuesult. Do not includ | igh August 31. de any income | If the amount m | ount of your | our monthly incom once. For examp | ne varied during le, if both |
| · · | | | | Column A Debtor 1 | | | nn B or 2 or filing spouse | |
| | our gross wages, salary, tips, bonuses, overtime, ayroll deductions). | and commissi | ons (before all | \$ | 0.00 | \$ | 6,234.91 | |
| | limony and maintenance payments. Do not include olumn B is filled in. | payments from | a spouse if | \$ | 0.00 | \$ | 0.00 | |
| o fr a | Il amounts from any source which are regularly part fyou or your dependents, including child support om an unmarried partner, members of your household roommates. Include regular contributions from a spled in. Do not include payments you listed on line 3. | . Include regula d, your depende | r contributions ents, parents, | \$ | 0.00 | \$ | 0.00 | |
| 5. N | et income from operating a business, profession, | | hton 4 | | | | | |
| | | \$ 0.00 | otor 1 | | | | | |
| | ross receipts (before all deductions) | -\$ 0.00 | - | | | | | |
| | ordinary and necessary operating expenses | | Copy here -> | \$ | 0.00 | \$ | 0.00 | |
| | et monthly income from a business, profession, or far et income from rental and other real property | шф | | * | | * — | | |
| U. N | et income from rental and other real property | Del | btor 1 | | | | | |
| G | ross receipts (before all deductions) | \$ 0.00 | | | | | | |
| | ordinary and necessary operating expenses | -\$ 0.00 | - | | | | | |
| | et monthly income from rental or other real property | \$ 0.00 | Copy here -> | \$ | 0.00 | \$ | 0.00 | |

Official Form 122A-1

7. Interest, dividends, and royalties

0.00

0.00

\$

Dessie J Hughes Debtor 2 Case number (if known) Column B Column A Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you 0.00 For your spouse Pension or retirement income. Do not include any amount received that was a 0.00 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 0.00 0.00 0.00 Total amounts from separate pages, if any. 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 0.00 6,234.91 6,234.91 \$ each column. Then add the total for Column A to the total for Column B. Total current monthly Part 2: **Determine Whether the Means Test Applies to You** 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 6,234.91 Multiply by 12 (the number of months in a year) **x** 12 74,818.92 12b. The result is your annual income for this part of the form 12h. 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. Fill in the number of people in your household. 60,809.00 Fill in the median family income for your state and size of household. 13. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. 14b. Go to Part 3 and fill out Form 122A-2. Part 3: Sian Below By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. X /s/ Jeffery L Hughes X /s/ Dessie J Hughes Jeffery L Hughes **Dessie J Hughes** Signature of Debtor 1 Signature of Debtor 2 Date June 29, 2018 Date June 29, 2018 MM / DD / YYYY MM / DD / YYYY If you checked line 14a, do NOT fill out or file Form 122A-2. If you checked line 14b, fill out Form 122A-2 and file it with this form.

Jeffery L Hughes

Debtor 1

| Fill ir | n this information to identify your case: | Check the appropriate box as directed in lines 40 or 42: |
|-----------------|---|--|
| Debte | or 1 Jeffery L Hughes | IIII65 40 01 42. |
| Debto | or 2 Dessie J Hughes use, if filing) | According to the calculations required by this Statement: |
| ` ' | | ■ 1. There is no presumption of abuse. |
| Unite | d States Bankruptcy Court for the: Western District of Michigan | ☐ 2. There is a presumption of abuse. |
| Case (if kno | number | |
| _(II KII | OWITY | ☐ Check if this is an amended filing |
| Offi | cial Form 122A - 2 | _ c |
| | apter 7 Means Test Calculation | 04/1 |
| | • | |
| To fill | out this form, you will need your completed copy of Chapter 7 St | tatement of Your Current Monthly Income (Official Form 122A-1). |
| Be as | complete and accurate as possible. If two married people are fili | ing together, both are equally responsible for being accurate. If more |
| space | e is needed, attach a separate sheet to this form, Include the line i | |
| additi | onal pages, write your name and case number (if known). | |
| Part | 1: Determine Your Adjusted Income | |
| 4 | Computer total august monthly in some | and 44 from Official Form 4004 4 hors |
| 1. | Copy your total current monthly income. Copy lin | ne 11 from Official Form 122A-1 here=> \$ 6,234.91 |
| 2. | Did you fill out Column B in Part 1 of Form 122A-1? | |
| | □ No. Fill in \$0 for the total on line 3. | |
| | ■ Yes. Is your spouse Filing with you? | |
| | ☐ No. Go to line 3. | |
| | ■ Yes. Fill in \$0 for the total on line 3. | |
| | Adjust your current monthly income by subtracting any part of you household expenses of you or your dependents. Follow these step | |
| | On line 11, Column B of Form 122A–1, was any amount of the income expenses of you or your dependents? | e you reported for your spouse NOT regularly used for the household |
| | ■ No. Fill in 0 for the total on line 3. | |
| | ☐ Yes. Fill in the information below: | |
| | | |
| | State each purpose for which the income was used | Fill in the amount you are subtracting from |
| | For example, the income is used to pay your spouse's tax debt support other than you or your dependents. | your spouse's income |
| | | \$ |
| | | • |
| | | \$ |
| | | \$ |
| | Total | \$ 0.00 |
| | Total. | |
| | | Copy total here=> \$0.00 |
| | | |
| 4. | Adjust your current monthly income. Subtract line 3 from line 1. | \$ <u>6,234.91</u> |

Official Form 122A-2

Case:18-02908-swd Doc #:1 Filed: 06/29/2018 Page 61 of 77

| Jebtor 1 Jeffery L Hughes Dessie J Hughes | Case number (if known) |
|--|--|
| Part 2: Calculate Your Deductions from Your Income | |
| | Local Standards for certain expense amounts. Use these amounts andards, go online using the link specified in the separate available at the bankruptcy clerk's office. |
| your actual expenses if they are higher than the standards. I | s of your actual expense. In later parts of the form, you will use some of Do not deduct any amounts that you subtracted fro your spouse's that you subtracted from in income in lines 5 and 6 of form 122A-1. |
| If your expenses differ from month to month, enter the average | ige expense. |
| Whenever this part of the from refers to you, it means both y | ou and your spouse if Column B of Form 122A-1 is filled in. |
| 5. The number of people used in determining your dec | ductions from income |
| Fill in the number of people who could be claimed as explus the number of any additional dependents whom you the number of people in your household. | |
| National Standards You must use the IRS National | al Standards to answer the questions in lines 6-7. |
| 6. Food, clothing, and other items: Using the number o Standards, fill in the dollar amount for food, clothing, and | |
| the dollar amount for out-of-pocket health care. The nu | aber of people you entered in line 5 and the IRS National Standards, fill in mber of people is split into two categoriespeople who are under 65 and e a higher IRS allowance for health care costs. If your actual expenses are ional amount on line 22. |
| People who are under 65 years of age | |
| 7a. Out-of-pocket health care allowance per person | \$ <u>52</u> |
| 7b. Number of people who are under 65 | X 2 |
| 7c. Subtotal. Multiply line 7a by line 7b. | \$104.00 Copy here=> \$104.00 |
| People who are 65 years of age or older | |
| 7d. Out-of-pocket health care allowance per person | \$114_ |
| 7e. Number of people who are 65 or older | X |
| 7f. Subtotal. Multiply line 7d by line 7e. | \$ 0.00 Copy here=> +\$ 0.00 |
| 7g. T otal. Add line 7c and line 7f | \$ 104.00 Copy total here=> \$ 104.00 |
| | |

| Debtor Debtor | | effery L essie J | | | | | Case number (| (if known) | | | | |
|------------------|-------------|---------------------|--|------------|----------------|-------------------|----------------|------------|---------|----------------|---------------------------------|--------|
| Lo | cal Sta | ndards | You must use the IRS Local Standard | ds to answ | er the q | uestions in lin | es 8-15. | | | | | |
| | | | tion from the IRS, the U.S. Trustee F ses into two parts: | Program h | nas divid | ded the IRS L | ocal Standa | ard for | housin | g for | | |
| | Housir | ng and u | tilities - Insurance and operating exp | oenses | | | | | | | | |
| | Housi | ng and u | tilities - Mortgage or rent expenses | | | | | | | | | |
| То | answe | er the qu | estions in lines 8-9, use the U.S. Tru | stee Prog | jram ch | art. | | | | | | |
| | | | o online using the link specified in the so be available at the bankruptcy clerk's | | nstructio | ons for this forr | n. | | | | | |
| 8. | | | utilities - Insurance and operating e mount listed for your county for insuran | | | | | | | 5, fill \$ | | 528.00 |
| 9. | Hous | sing and | utilities - Mortgage or rent expenses | s: | | | | | | | | |
| | | | e number of people you entered in line your county for mortgage or rent expe | | | | | \$ | ! | 989.00 | | |
| | 9b. | Total ave | erage monthly payment for all mortgage | es and oth | er debts | s secured by y | our home. | | | | | |
| | | contractu | ate the total average monthly payment ally due to each secured creditor in the uptcy. Then divide by 60. | | | | | | | | | |
| | | Name of | the creditor | | Average paymer | e monthly nt | | | | | | |
| | | Lemay | Enterprises, LLC | | \$ | 500.00 | | | | | | |
| | | Rosema | arie Farthing | | \$ | 3,289.06 | | | | | | |
| | | | Total average monthly payr | ment | \$ | 3,789.06 | Copy here=> | -\$ | 3 | ,789.06 | Repeat this amount on line 33a. | |
| | 9c. | Net mort | gage or rent expense. | | | | | | | | | |
| | | | line 9b (total average monthly payment spense). If this amount is less than \$0, | | | | \$ | | 0.00 | Copy here=> | \$ | 0.00 |
| 10. | | | hat the U.S. Trustee Program's divis liculation of your monthly expenses | | | | | g is inc | orrect | and | \$ | 0.00 |
| | Exp | olain why: | | | | | | | | | | |
| 11. | Loca | al transpo | ortation expenses: Check the number | of vehicle | es for wh | nich you claim | an ownersh | ip or op | erating | expense | | |
| | □ 0. | . Go to lin | e 14. | | | | | | | | | |
| | □ 1. | . Go to lin | e 12. | | | | | | | | | |
| | 2 | or more. | Go to line 12. | | | | | | | | | |
| 12. | | | ation expense: Using the IRS Local Stenses, fill in the Operating Costs that a | | | | | | | | \$ | 592.00 |

| Debtor 1 Debtor 2 | Jeffery L Hughes Dessie J Hughes | | | Case numb | er (<i>if known</i>) | | |
|----------------------|--|------------------|-------------------------------|------------------------|----------------------------------|---------------------------------------|--------|
| | Vehicle ownership or lease expense: Using the IRS Local You may not claim the expense if you do not make any loan more than two vehicles. | | | | | | |
| Vel | Describe Vehicle 1: 2016 Subaru Crosstrek | 13000 mile | es leased | vehicle | | _ | |
| 13a. | Ownership or leasing costs using IRS Local Standard | | | \$_ | 497.00 | - | |
| 13b. | Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles. | | | | | | |
| | To calculate the average monthly payment here and on line are contractually due to each secured creditor in the 60 mont bankruptcy. Then divide by 60. | | | t | | | |
| | Name of each creditor for Vehicle 1 | Average m | onthly | | | | |
| | Chase Auto Finace | \$ | 132.00 | | | | |
| | Total Average Monthly Payment | \$ | 132.00 | Copy here => | -\$ <u>13</u> | Repeat this amount on line 33b. | |
| 13c. | Net Vehicle 1 ownership or lease expense | | | | | Copy net Vehicle 1 | |
| | Subtract line 13b from line 13a. if this amount is less than \$0 | , enter \$0. | | \$_ | 365.00 | expense here => \$ | 365.00 |
| Vel | Describe Vehicle 2: 2010 Jeep Liberty, 196, | ,000 miles | | | | | |
| 13d. | Ownership or leasing costs using IRS Local Standard | | | . \$_ | 0.00 | _ | |
| | Average monthly payment for all debts secured by Vehicle 2. leased vehicles. | . Do not inclu | de costs for | | | | |
| | Name of each creditor for Vehicle 2 | Average mpayment | onthly | | | | |
| | -NONE- | \$ | | | | | |
| | Total Average Monthly Payment | \$ | 0.00 | Copy here => -\$ | 0. | Repeat this amount on line 33c. | |
| 13f. | Net Vehicle 2 ownership or lease expense Subtract line 13e from line 13d. if this amount is less than \$0 | , enter \$0 | | \$_ | 0.00 | Copy net Vehicle 2 expense here => \$ | 0.00 |
| 14. | Public transportation expense: If you claimed 0 vehicles in Transportation expense allowance regardless of whether you | | | | ndards, fill in the | e <i>Public</i> \$ | 0.00 |
| | Additional public transportation expense: If you claimed also deduct a public transportation expense, you may fill in wonot claim more than the IRS Local Standard for <i>Public Trans</i> | hat you belie | icles in line ve is the ap | 11 and if | f you claim that expense, but | t you may you may \$ | 0.00 |

Debtor 1 Debtor 2 Dessie J Hughes Case number (if known)

| Oth | • • | to the expense deductions listed above, you are allowed your monthly expenses g IRS categories. | for | |
|-----|---|--|------|----------|
| 16. | self-employment taxes, social security to your pay for these taxes. However, if you | rou will actually owe for federal, state and local taxes, such as income taxes, taxes, and Medicare taxes. You may include the monthly amount withheld from ou expect to receive a tax refund, you must divide the expected refund by 12 monthly amount that is withheld to pay for taxes. | | |
| | Do not include real estate, sales, or use | e taxes. | \$ | 1,206.03 |
| 17. | Involuntary deductions: The total more contributions, union dues, and uniform | nthly payroll deductions that your job requires, such as retirement costs. | | |
| | Do not include amounts that are not red | quired by your job, such as voluntary 401(k) contributions or payroll savings. | \$ | 0.00 |
| 18. | filing together, include payments that yo | niums that you pay for your own term life insurance. If two married people are ou make for your spouse's term life insurance. Do not include premiums for life on-filing spouse's life insurance, or for any form of life insurance other than | \$ | 0.00 |
| 19. | Court-ordered payments: The total m administrative agency, such as spousal | onthly amount that you pay as required by the order of a court or or child support payments. | | |
| | Do not include payments on past due o | bligations for spousal or child support. You will list these obligations in line 35. | \$ | 0.00 |
| 20. | Education: The total monthly amount t ■ as a condition for your job, or | hat you pay for education that is either required: | | |
| | for your physically or mentally challe | enged dependent child if no public education is available for similar services. | \$ | 0.00 |
| 21. | Childcare: The total monthly amount the | nat you pay for childcare, such as babysitting, daycare, nursery, and preschool. | _ | 0.00 |
| | Do not include payments for any eleme | ntary or secondary school education. | \$ | 0.00 |
| 22. | that is required for the health and welfa | cluding insurance costs: The monthly amount that you pay for health care re of you or your dependents and that is not reimbursed by insurance or paid ally the amount that is more than the total entered in line 7. | | • • • |
| | Payments for health insurance or health | n savings accounts should be listed only in line 25. | \$ | 0.00 |
| 23. | for you and your dependents, such as p | ervices: The total monthly amount that you pay for telecommunication services pagers, call waiting, caller identification, special long distance, or business cell for your health and welfare or that of your dependents or for the production of imployer. | | |
| | | e telephone, internet and cell phone service. Do not include self-employment ne 5 of Official Form 122A-1, or any amount you previously deducted. | +\$_ | 0.00 |
| 24. | Add all of the expenses allowed und Add lines 6 through 23. | er the IRS expense allowances. | \$ | 3,997.03 |

Debtor 1 Debtor 2 Dessie J Hughes Case number (if known)

| Add | itional | Expense Deductions | These are addition | al deduction | ns allowed by th | e Means Test. | | |
|-----|----------|---|--|---------------------------|-------------------------------------|--|-----|--------|
| | | | Note: Do not includ | le any expe | ense allowances | listed in lines 6-24. | | |
| 25. | insura | | | | | ses. The monthly expenses for health y necessary for yourself, your spouse, o | r | |
| | Health | insurance | | \$ | 127.40 | | | |
| | Disabi | lity insurance | | \$ | 0.00 | | | |
| | Health | savings account | | + \$ | 281.66 | | | |
| | Total | | | \$ | 409.06 | Copy total here=> | \$ | 409.06 |
| | Do you | actually spend this total | amount? | | | J | | |
| | | No. How much do you a | ctually spend? | | | | | |
| | | Yes | | \$ | | | | |
| 26. | continu | ue to pay for the reasonab | ole and necessary ca our immediate family | are and sup who is una | port of an elderlable to pay for su | actual monthly expenses that you will y, chronically ill, or disabled member of uch expenses. These expenses may 9A(b). | \$ | 0.00 |
| 27. | | | | | | nses that you incur to maintain the es Act or other federal laws that apply. | | |
| | By law | , the court must keep the | nature of these expe | enses confi | dential. | | \$ | 0.00 |
| 28. | Additi | onal home energy costs | . Your home energy | costs are i | ncluded in your | insurance and operating expenses on | | |
| | If you I | believe that you have hom n fill in the excess amount | | | nan the home er | nergy costs included in expenses on line | ı | |
| | | ust give your case trustee at claimed is reasonable a | | our actual e | expenses, and y | ou must show that the additional | \$ | 0.00 |
| 29. | \$160.4 | | for your dependent | | | e monthly expenses (not more than han 18 years old to attend a private or | | |
| | | ust give your case trustee d is reasonable and nece | | | | ou must explain why the amount 23. | | |
| | * Subje | ect to adjustment on 4/01/ | 19, and every 3 yea | rs after that | for cases begu | n on or after the date of adjustment. | \$ | 0.00 |
| 30. | higher | | and clothing allowand | ces in the II | RS National Sta | ctual food and clothing expenses are ndards. That amount cannot be more | | |
| | | d a chart showing the max tions for this form. This ch | | | | link specified in the separate rk's office. | | |
| | You m | ust show that the addition | al amount claimed is | s reasonabl | e and necessar | y. | \$ | 0.00 |
| 31. | | nuing charitable contribution on the number of characters to a religious or characters. | | | | ntribute in the form of cash or financial | +\$ | 0.00 |
| 32. | | II of the additional expenses 25 through 31. | nse deductions. | | | | \$ | 409.06 |

Jeffery L Hughes Debtor 1 **Dessie J Hughes** Debtor 2 Case number (if known) **Deductions for Debt Payment** 33. For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33e. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Mortgages on your home: Average monthly payment 33a. Copy line 9b here 3,789.06 Loans on your first two vehicles: 33b. Copy line 13b here 132.00 33c. Copy line 13e here 0.00 33d. List other secured debts: Name of each creditor for other secured debt Identify property that secures the debt Does payment include taxes or insurance? Nο -NONE-Yes No П Yes No ☐ Yes Copy 3.921.06 33e. Total average monthly payment. Add lines 33a through 33d 3.921.06 here=> 34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? No. Go to line 35. The state any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Name of the creditor Identify property that secures the debt Total cure Monthly cure amount amount -NONE-\$ $\div 60 =$ \$ Сору total 0.00 0.00 Total \$ here=> \$ 35. Do you owe any priority claims such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507.

■ No. Go to line 36.

Yes. Fill in the total amount of all of these priority claims. Do not include current or

Total amount of all past-due priority claims

ongoing priority claims, such as those you listed in line 19.

938.35

56,300.83 ÷ 60 = \$

| Debtor 1 Debtor 2 | | ery L Hughes sie J Hughes | | Cas | e number (if ki | nown) | | |
|----------------------|------------------|---|----------------|---------------------|-----------------|---------------|-------------|------------------|
| Fo | or more | eligible to file a case under Chapter 13? 11 U.S.C. § 1 information, go online using the link for <i>Bankruptcy Bas</i> ns for this form. <i>Bankruptcy Basics</i> may also be available. | ics specified | | | | | |
| | l _{No.} | Go to line 37. | | | | | | |
| | l Yes. | Fill in the following information. | | | | | | |
| | | Projected monthly plan payment if you were filing under | r Chapter 13 | | \$ | | | |
| | | Current multiplier for your district as stated on the list is Administrative Office of the United States Courts (for diand North Carolina) or by the Executive Office for Unite (for all other districts). | stricts in Ala | stees | x | | 1 | |
| | | To find a list of district multipliers that includes your dist the link specified in the separate instructions for this for be available at the bankruptcy clerk's office. | | | | | Copy total | |
| | | Average monthly administrative expense if you were fili | ng under Ch | apter 13 | \$ | | here=> \$ | |
| | | of the deductions for debt payment. s 33e through 36. | | | | | | \$4,859.41_ |
| Total | Deduc | tions from Income | | | | | | |
| 38. A c | dd all o | f the allowed deductions. | | | | | | |
| | | e 24, All of the expenses allowed under IRS | \$ | 3,997.03 | | | | |
| | • | e allowancese and a substitution and a substi | ф Ф | | _ | | | |
| | | | Ψ | 409.06 | _ | | | |
| (| opy iin | e 37, All of the deductions for debt payment | +\$ | 4,859.41 | | | | |
| | | Total deductions | \$ | 9,265.50 | Copy t | otal here | => \$ | 9,265.50 |
| Part 3: | Det | ermine Whether There is a Presumption of Abuse | | | | | | |
| 39. C a | alculate | e monthly disposable income for 60 months | | | | | | |
| 3 | 39a. Co | py line 4, adjusted current monthly income | \$ | 6,234.91 | | | | |
| | | py line 38, <i>Total deductions</i> | -\$ | 9,265.50 | _ | | | |
| 3 | | nthly disposable income. 11 U.S.C. § 707(b)(2). btract line 39b from line 39a | \$ | -3,030.59 | Copy here=> | . \$ | -3,030 | .59 |
| F | or the i | next 60 months (5 years) | | | | x 60 | 0 | |
| | | · · · · · · · · · · · · · · · · · · · | | | | | | |
| 3 | 39d. To | tal. Multiply line 39c by 60 | 39d. | \$1 | 81,835.4 | Copy here= | I C | -181,835.40 |
| 40. Fi | nd out | whether there is a presumption of abuse. Check the | box that app | lies: | | | | |
| | The li | ine 39d is less than \$7,700*. On the top of page 1 of the | is form, chec | k box 1, <i>The</i> | ere is no pr | esumption | of abuse. (| Go to Part 5. |
| | | ine 39d is more than \$12,850*. On the top of page 1 of if you claim special circumstances. Go to Part 5. | this form, ch | eck box 2, 7 | Γhere is a p | presumptio | n of abuse. | You may fill out |
| | The li | ine 39d is at least \$7,700*, but not more than \$12,850 | *. Go to line | 41. | | | | |
| *S | Subject t | to adjustment on 4/01/19, and every 3 years after that fo | r cases filed | on or after th | ne date of a | adjustment | t. | |

Jeffery L Hughes

| | | ery L Hughes sie J Hughes | Cas | e number (<i>if</i> | known) | | |
|-------------|-----------------------|--|--|--|--|---------------------------|-----|
| 41. | 41a. | Fill in the amount of your total nonpriority unsecured debt. If y A Summary of Your Assets and Liabilities and Certain Statistical Ir Schedules (Official Form 106Sum), you may refer to line 3b on that | nformation | \$ | .25 | - - | |
| | 41b. | 25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(| ,,,,,,,,,, | \$ | | Copy here=> | \$ |
| 25 | 5% of y | Multiply line 41a by 0.25 ne whether the income you have left over after subtracting all a your unsecured, nonpriority debt. ne box that applies: | | ctions is | enough to | pay | |
| _ | Line | 39d is less than line 41b. On the top of page 1 of this form, check o Part 5. | box 1, <i>There</i> | is no pres | sumption of | abuse. | |
| | | 39d is equal to or more than line 41b. On the top of page 1 of this umption of abuse. You may fill out Part 4 if you claim special circums | | | | | |
| art 4: | Giv | ve Details About Special Circumstances | | | | | |
| | NO. G | o to Part 5. | | | | | |
| | ite Yo ne | Il in the following information. All figures should reflect your average em. You may include expenses you listed in line 25. but must give a detailed explanation of the special circumstances that excessary and reasonable. You must also give your case trustee docutiustments. | t make the ex | penses o | r income ad | ljustments | ach |
| | ite Yo ne ad | em. You may include expenses you listed in line 25. but must give a detailed explanation of the special circumstances that excessary and reasonable. You must also give your case trustee documents. | t make the ex imentation of | penses o your actu | r income ad | ljustments s or income | ach |
| | ite Yo ne ad | em. You may include expenses you listed in line 25. but must give a detailed explanation of the special circumstances that excessary and reasonable. You must also give your case trustee doculiustments. | t make the ex imentation of | penses o your actu erage mo income a | r income ad al expenses | ljustments s or income | ach |
| | ite Yo ne ad | em. You may include expenses you listed in line 25. but must give a detailed explanation of the special circumstances that excessary and reasonable. You must also give your case trustee doculiustments. | t make the ex imentation of | penses o your actu erage mo income a | r income ad al expenses | ljustments s or income | ach |
| | ite Yo ne ad | em. You may include expenses you listed in line 25. but must give a detailed explanation of the special circumstances that excessary and reasonable. You must also give your case trustee doculiustments. | t make the ex imentation of Avor | penses o your actu | r income ad aal expenses onthly expendjustment | ljustments s or income | ach |
| | ite Yo ne ad | em. You may include expenses you listed in line 25. but must give a detailed explanation of the special circumstances that excessary and reasonable. You must also give your case trustee doculiustments. | t make the ex imentation of Avor | penses o your actu | r income ad al expenses | ljustments s or income | ach |
| | ite Your net and | em. You may include expenses you listed in line 25. Ou must give a detailed explanation of the special circumstances that ecessary and reasonable. You must also give your case trustee docution that is a detailed explanation of the special circumstances. Give a detailed explanation of the special circumstances | t make the ex imentation of Avor | penses o your actu | r income ad aal expenses onthly expendjustment | ljustments s or income | ach |
| | ite Young | em. You may include expenses you listed in line 25. Ou must give a detailed explanation of the special circumstances that ecessary and reasonable. You must also give your case trustee docutionstances. | Avoor is | penses o your actu | r income ad aal expenses onthly expe djustment | ljustments s or income | |
| | sign By si | em. You may include expenses you listed in line 25. but must give a detailed explanation of the special circumstances that excessary and reasonable. You must also give your case trustee doculijustments. Give a detailed explanation of the special circumstances gn Below igning here, I declare under penalty of perjury that the information or | Avoor is | penses o your acturer age moincome a | r income ad aal expenses onthly expe idjustment | ljustments s or income | |
| □ \\ art 5: | sig By si X /s. | cm. You may include expenses you listed in line 25. Sour must give a detailed explanation of the special circumstances that be essary and reasonable. You must also give your case trustee docudiustments. Give a detailed explanation of the special circumstances Give Below Gigning here, I declare under penalty of perjury that the information or Justice Justice August 1988 Justice Justice 1988 Jus | Avoor is this stateme | penses of your actured | r income ad aal expenses onthly expe idjustment | ljustments s or income | |
| art 5: | sige By si X /s. | em. You may include expenses you listed in line 25. Sou must give a detailed explanation of the special circumstances that excessary and reasonable. You must also give your case trustee docudiustments. Give a detailed explanation of the special circumstances Give a detailed explanation of the special c | Avoor is this stateme | penses of your actured | r income ad aal expenses onthly expe idjustment | ljustments s or income | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

Case:18-02908-swd Doc #:1 Filed: 06/29/2018 Page 70 of 77

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case:18-02908-swd Doc #:1 Filed: 06/29/2018 Page 73 of 77

United States Bankruptcy Court Western District of Michigan

| In re | Jeffery L Hughes Dessie J Hughes | | Case No. | |
|--------|-------------------------------------|--|------------------|------------|
| | | Debtor(s) | Chapter 7 | |
| The ab | | IFICATION OF CREDITOR that the attached list of creditors is true and co | | knowledge. |
| Date: | June 29, 2018 | /s/ Jeffery L Hughes | | |
| | | Jeffery L Hughes Signature of Debtor | | |
| | | Signature of Debtor | | |
| Date: | June 29, 2018 | /s/ Dessie J Hughes | | |
| | | Dessie J Hughes | | |

Signature of Debtor

13TH CIRCUIT COURT 328 WASHINGTON ST STE 300 TRAVERSE CITY MI 49684

86TH DISTRICT CT. 280 WASHINGTON ST., STE. 114C TRAVERSE CITY MI 49684

AMERICAN EXPRESS P.O. BOX 297885 FT LAUDERDALE FL 33329-7885

AMERICAN EXPRESS PO BOX 981535 EL PASO TX 79998

ARK ELECTRIC PO BOX 6943 TRAVERSE CITY MI 49696

B-WOOD FARMS, LLC 6211 S. RAILWAY CMN WILLIAMSBURG MI 49690

BROWNWOOD INVESTORS, LLC 138 N. MERAMEC AVE SAINT LOUIS MO 63105

CAPITAL ONE BANK
P.O. BOX 85617
RICHMOND VA 23285-5617

CAROL H. VITTERT 750 S. PRICE RD. SAINT LOUIS MO 63124

CAVALRY SPV I, LLC C/O ROOSEN, VARCHETTI & OLIVER PO BOX 2305 MOUNT CLEMENS MI 48046

CHASE P.O. BOX 15836 WILMINGTON DE 19886-5836 CHASE AUTO FINACE PO BOX 901076 FORT WORTH TX 76101

CHASE BANK PO BOX 15548 WILMINGTON DE 19886-5548

CITI CARD CREDIT SERVICES CENTRALIZED BANKRUPTCY PO BOX 20507 KANSAS CITY MO 64195

CLIENT SERVICES, INC 3451 HARRY TRUMAN BLVD. SAINT CHARLES MO 63301-4047

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